Case 17-26050 Doc 1 Filed 08/30/17 Entered 08/30/17 14:26:11 Desc Mair Document Page 1 of 92 UNITED STATES BANKRUPTCY COURS Information to identify your case:

Fill in this information to identify your	case:
United States Bankruptcy Court for the:	
NORTHERN District	of <u>ILLINOIS</u>
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

AUG 30 2017

JEFFREY P. ALLSTEADT, CLERK INTAKE 3

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Tyra	
	identification (for example, your driver's license or	First name Camille	First name
	passport). Bring your picture	Middle name Freeman	Middle name
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First name	First name
	years Include your married or	Middle name	
	maiden names.	widdle flame	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
skoji svjegas			
	Only the last 4 digits of your Social Security	xxx - xx - <u>6671</u>	xxx - xx
	number or federal	OR	OR .
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1 I Yra Camille First Name Middle 1	Freeman Name Last Name	Case number (if known)
Mindle 4	tane Last (val)re	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	617 Cumberland Trail Aa1 Number Street	Number Street
	Roselle IL 60172	
	City State ZIP Code	City State ZIP Code
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	617 Cumberland Trail As1 Number Street	Number Street
	P.O. Box	P.O. Box
	Roselle TL 60172 City State ZIP Code	City State ZIP Code
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Tyra Camille

Freeman

Debtor 1

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Debtor 1 I Yra Camille First Name Midd	e Name	Freema Last Nar		73 M744	Case number (if	known)
Part 2: Tell the Court A	bout Your	Bankru	ptcy Case			
7. The chapter of the Bankruptcy Code you	Check for Bar	one. (Fo	r a brief description (Form 2010)). Als	on of each, see <i>Not</i> o, go to the top of p	ice Required by 1 age 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
are choosing to file under	******	apter 7		- , ,	•	
ditaei	☐ Ch	apter 11	1			
		apter 12				
	heritarrama	apter 13				
s. How you will pay the fe	loc you suk with I ne App I re By less pay	al court urself, you pmitting n a pre-p eed to p plication quest tl law, a ju s than 1: the fee	for more details ou may pay with your payment of printed address pay the fee in in of or Individuals hat my fee be sudge may, but is 50% of the office in installments;	s about how you re n cash, cashier's con your behalf, you nstallments. If you to Pay The Filing waived (You may s not required to, viial poverty line the). If you choose the	nay pay. Typica check, or money ur attorney may bu choose this of Fee in Installment request this opwaive your fee, at applies to you is option, you m	neck with the clerk's office in your lly, if you are paying the fee of order. If your attorney is pay with a credit card or check potion, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is air family size and you are unable to nust fill out the Application to Have the with your petition.
. Have you filed for bankruptcy within the last 8 years?	☑ No	District		When		
· · · · · · · · · · · · · · · · · · ·					MM / DD / YYYY	
		District	***************************************	When	MM / DD / YYYY	Case number
		District				Case number
					MM / DD / YYYY	
Are any bankruptcy	Z No					Control of the Contro
cases pending or being filed by a spouse who is	<u></u>	Debtor				Relationship to you
not filing this case with	, , , , , , , , , , , , , , , , , , , ,					Case number, if known
you, or by a business partner, or by an affiliate?				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MM / DD / YYYY	Case number, il known
		Debtor				Relationship to you
		District		When	***	Case number, if known
*** **					MM/DD/YYYY	
Do you rent your residence?	No. Yes.	Go to li Has you	ur landlord obtain	ed an eviction judgi	ment against you a	and do you want to stay in your
		₩ No.	. Go to line 12.			
		U Yes	s. Fill out <i>Initial St</i>	atement About an E	viction Judgment	Against You (Form 101A) and file it with
		this	bankruptcy petiti	on.		

Tyra Camille

Freeman

Debtor 1

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Debtor 1	Tyra Camille First Name Middle Nat	me	Freeman Last Name		Case	number (if known)		
Part 3:	Report About Any I	Busines	ses You Own as a S	ole Propr	ietor			
	ou a sole proprietor		Go to Part 4.					
	y full- or part-time ness?	☐ Yes	. Name and location of b	usiness				
busine individ separa	proprietorship is a ess you operate as an lual, and is not a ate legal entity such as		Name of business, if any	***************************************				
LLC.	oration, partnership, or		Number Street					
sole p separa	have more than one roprietorship, use a sate sheet and attach it				**************************************		·	
to this	petition.		City			State	ZIP Code	
			Check the appropriate i	hax ta desc	rihe vour husines	··		
			Health Care Busine					
			Single Asset Real E		-			
			Stockbroker (as def					
			Commodity Broker	as defined	in 11 U.S.C. § 10	1(6))		
			None of the above					
Chapt Bankt are you debto For a co busine	ou filing under ter 11 of the ruptcy Code and ou a small business or? definition of small ses debtor, see .C. § 101(51D).	most reany of the	e filing under Chapter 1: appropriate deadlines. If cent balance sheet, state lese documents do not e I am not filing under Chapte I am filing under Chapte the Bankruptcy Code.	you indicatement of operiors, followapter 11.	e that you are a s erations, cash-flov the procedure in	mall business v statement, a 11 U.S.C. § 11	debtor, you i nd federal in 16(1)(B).	must attach your come tax return or if
		☐ Yes.	l am filing under Chapte Bankruptcy Code.	r 11 and Ia	ım a small busine:	ss debtor acco	rding to the	definition in the
Part 4:	Report if You Own o	or Have	Any Hazardous Prop	erty or A	ny Property Th	at Needs In	nmediate /	Attention
4. Do yo	u own or have any	☑ No						
	rty that poses or is d to pose a threat		What is the hazard?					
of imn identif public Or do	ninent and liable hazard to health or safety? you own any							
	ty that needs liate attention?		If immediate attention is	s needed, v	vhy is it needed?_			
perisha. that mu	mple, do you own ble goods, or livestock st be fed, or a building eds urgent repairs?			<u> </u>	, , , , , , , , , , , , , , , , , , ,			
			Where is the property?	Number	Street	VII. 1		
				City			State	ZIP Code

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Debtor 1

Tyra Camille Middle Name

Freeman

Case	number	(if known)
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:	Α	bo	ut	D	eb	tor	1	:
-----------------	---	----	----	---	----	-----	---	---

You must check one:

received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

L jeceived a briefing from an approved credit dounseling agency within the 180 days before I

€ounseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

∜Vithin 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-26050 Doc 1 Filed 08/30/17 Entered 08/30/17 14:26:11 Desc Main Document Page 6 of 92

First Name Middle N	ame Last Name	Case number (# &	10W/1)
Part 6: Answer These Qu	estions for Reporting Purpo	oses	
16. What kind of debts do you have?	as 'incurred by an individual No. Go to line 16b. Yes. Go to line 17.	dual primarily for a personal, family, or hou	usehold purpose."
	money for a business or No. Go to line 16c.	arily business debts? Business debts investment or through the operation of the	s are debts that you incurred to obtain e business or investment.
	Yes. Go to line 17. 16c. State the type of debts y	ou owe that are not consumer debts or bu	isiness debts.
17. Are you filing under Chapter 7?	No. I am not filing under	Chapter 7, Go to line 18.	den jeur visite de verstil deur der 1921 bei de Afrika der der peit gent verstil des des statistischen der
Do you estimate that afte any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expen	pter 7. Do you estimate that after any exei ses are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
8. How many creditors do you estimate that you owe?	☐ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
9. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and
	If I have chosen to file under C	Chapter 7, I am aware that I may proceed, . I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 och chapter, and I choose to proceed
	If no attorney represents me at this document, I have obtained	nd I did not pay or agree to pay someone d and read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).
	I understand making a false sta	sult in fines up to \$250,000, or imprisonme	money or property by fraud in connection
	×	x	
	Signature of Debtor 1 Executed on 08 30	Signature 2017 Executed	e of Debtor 2
	MM / DD /	YYYY	MM / DD /YYYY

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Debtor 1	Tyra Camille First Name Middle Nai	Freeman ne Last Name	Case number (if known)			
represent	attorney, if you are ted by one	I, the attorney for the debtor(s) named i to proceed under Chapter 7, 11, 12, or available under each chapter for which the notice required by 11 U.S.C. § 342(13 of title 11, United States Code, a the person is eligible. I also certify t	ormed nd have	the e exp	plained the relief delivered to the debtor(
If you are not represented by an attorney, you do not need to file this page.		knowledge after an inquiry that the info	mation in the schedules filed with th	e petiti	on is	s incorrect.
		Signature of Attorney for Debtor	Date	MM	/	DD /YYYY
		Printed name				
		Firm name				
		Number Street			·	
		City	State	ZIP C		
		3.0	State	217 (ode	
		Contact phone	Email address			701-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
		Bar number	State			

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Debtor 1	Tyra Camille First Name Middle Name	Freeman Last Name	Case number (if known)
bankrupto attorney	you are filing this cy without an	should understand that themselves successfully	individual, to represent yourself in bankruptcy court, but you many people find it extremely difficult to represent v. Because bankruptcy has long-term financial and legal strongly urged to hire a qualified attorney.
an attorne	represented by y, you do not e this page.	To be successful, you must technical, and a mistake or dismissed because you did hearing, or cooperate with t firm if your case is selected	correctly file and handle your bankruptcy case. The rules are very inaction may affect your rights. For example, your case may be not file a required document, pay a fee on time, attend a meeting or ne court, case trustee, U.S. trustee, bankruptcy administrator, or audit for audit. If that happens, you could lose your right to file another ctions, including the benefit of the automatic stay.
		You must list all your proper court. Even if you plan to pa in your schedules. If you do property or properly claim it also deny you a discharge case, such as destroying or cases are randomly audited	ty and debts in the schedules that you are required to file with the y a particular debt outside of your bankruptcy, you must list that debt not list a debt, the debt may not be discharged. If you do not list as exempt, you may not be able to keep the property. The judge can f all your debts if you do something dishonest in your bankruptcy hiding property, falsifying records, or lying. Individual bankruptcy to determine if debtors have been accurate, truthful, and complete, bus crime; you could be fined and imprisoned.
		If you decide to file without a hired an attorney. The court successful, you must be fam	in attorney, the court expects you to follow the rules as if you had will not treat you differently because you are filing for yourself. To be iliar with the United States Bankruptcy Code, the Federal Rules of the local rules of the court in which your case is filed. You must also
		Are you aware that filing for consequences? No Yes	pankruptcy is a serious action with long-term financial and legal
		Are you aware that bankrupt inaccurate or incomplete, you No	cy fraud is a serious crime and that if your bankruptcy forms are u could be fined or imprisoned?
		☐ No ☐ Yes. Name of Person	someone who is not an attorney to help you fill out your bankruptcy forms? tition Preparer's Notice, Declaration, and Signature (Official Form 119).
	(3	have read and understood th attorney may cause me to los	ge that I understand the risks involved in filing without an attorney. I is notice, and I am aware that filing a bankruptcy case without an e my rights or property if I do not properly handle the case.
		Signature of Debtor 1 Date OS 30/2 MM / DD / YYYY	Signature of Debtor 2 Date MM / DD / YYYY
		Contact phone <u>773.951.6695</u> Cell phone	Contact phone
		Email address	Cell phone

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Debtor 1	Tyra	Camille	Freeman	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States (Bankruptcy Court fo	r the: NORTHER Distric	t of ILLINOIS	

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

•	and the box at the top of this page.	
P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B.	\$ 0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$ 11692,00
	1c. Copy line 63, Total of all property on Schedule A/B	\$_11692 € ∞
Ρ;	art 2: Summarize Your Liabilities	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Your liabilities Amount you owe
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ <u>17009</u> , ©
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_ 0. 00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 301785.00
	Your total liabilities	\$ <u>318794</u> , @
Pa	nt 3: Summarize Your Income and Expenses	
4	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of Schedule I	\$
5.	Schedule J: Your Expenses (Official Form 106J)	1005
	Copy your monthly expenses from line 22c of Schedule J	\$ 1895.00

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Tyra Camille

Debtor 1

Freeman

Debtor 1 Tyra Camille Freeman Ca		Case number (if known)	ase number (if known)		
	A TOTAL STATE STAT	Lasi iyame			
2 (8)					
Pari	Answer These Quest	ions for Administrative and Statistical Re	cords		
6. A	re you filing for bankruptcy ur	nder Chapters 7, 11, or 13?			
	No. You have nothing to repor	rt on this part of the form. Check this box and submi	t this form to the court with your ot	her schedules.	
Ŀ	∕ res		·		
7. W	hat kind of debt do you have?	and the second section of the second second section is a second s	болун баймар төвүлүү байган байган байран ортон ортон байруулгар ортон ортон ортон ортон ортон ортон ортон орт Э	de de la colonia de como en como en estado en decembra de la como en entre en entre en entre en entre en entre	
Ĺ	Your debts are primarily con	nsumer debts. Consumer debts are those "incurred	Ebur on individual actuality to		
155	family, or household purpose."	'11 U.S.C. § 101(8). Fill out lines 8-9g for statistical	purposes. 28 U.S.C. § 159.	rsonal,	
	Your debts are not primarily this form to the court with your	consumer debts. You have nothing to report on the other schedules.	nis part of the form. Check this box	and submit	
le Sanou e suures uit	те ставов по принамент стойневичений сутре страв есте у принтиван учествующего на		rin ette i miljaninna kanssa menadakum må ett i kannada eksinada engamiska de eile og gjala g	empenyagian haryan sakara yang pamakan menang kerapa kan menangan balan sakara kan pelakaran sakaran beragai k	
8. F i	om the Statement of Your Cur	rrent Monthly Income: Copy your total current mon 22B Line 11; OR, Form 122C-1 Line 14.	thly income from Official	2.700	
		ZES ENG 11, ON, FORM 1220-1 ENG 14.		\$ <u>2720. 00</u>	
Antonio San	ilipali tara masadi kalika mendia komunis repopur menda rangap ka jampanjajaan aja masa sasa sasa s	ikan kanan salam sa manan mangang dalahan ay mangang pangan ay mangan ay mangan ay mangan ay mangan ay mangan	Andrew Company of the		
9. C c	opy the following special cated	pories of claims from Part 4, line 6 of Schedule E	:/ F :		
		, , , , , , , , , , , , , , , , , , , ,			
			Total claim		
	•				
١	From Part 4 on Schedule E/F, o	copy the following:			
_					
9a	Domestic support obligations (Copy line 6a.)	\$ 0,00		
9b	. Taxes and certain other debts	you owe the government. (Copy line 6b.)	s 0.00		
	, and and dorain data debta	you owe the government. (Copy line ob.)	\$	<u></u>	
9c	. Claims for death or personal in	jury while you were intoxicated. (Copy line 6c.)	\$ <u>0, ∞</u>		
9d	. Student loans. (Copy line 6f.)		\$ <u>249548,00</u>	.	
9e	. Obligations arising out of a sen	aration agreement or divorce that you did not report	ion		
	priority claims. (Copy line 6g.)	aration agreement or divorce that you did not report	.as \$ 0, €0	=	
Qf	Debte to pension or profit chari	ng plane, and other similar dable. (Carachar Ob.)	1.0.00		
Ji,	poses to pension or pront-Shan	ng plans, and other similar debts. (Copy line 6h.)	+ \$ 0, 0)	-	
90	. Total. Add lines 9a through 9f.		2/05/0		
~9			\$ <u>249548, Ø</u>		
				-	

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			Document 1 age 11 of 32		
ill in this i	nformation to identify	your case and	this filing:		
ebtor 1	Tyra	Camille	Freeman		
obios O	First Name	Middle Name	i.ast Name		
btor 2 ouse, if filing) First Name	Middle Name	Last Name		
ited States	Bankruptcy Court for the:	NORTHER Dis	trict of ILLINOIS		
ase number					
				C	Check if this is a
Official	l Form 106A/E	2			amended filing
***************************************	dule A/B:	******	·tv		40/47
		· · · · · ·	-cy		12/15
Do you o			erest in any residence, building, land, or similar prop		
162.1	where is the property?		What is the property? Check all that apply.		
			Single-family home	Do not deduct secured cli the amount of any secure	aims or exemptions. Pu
1.1 Stri	eet address, if available, or	other description	 Duplex or multi-unit building 	Creditors Who Have Clair	ms Secured by Property
	, , , , , , , , , , , , , , , , , , ,		Condominium or cooperative	Current value of the	
-Spinite park August			Manufactured or mobile home Land	entire property?	portion you own?
			☐ Investment property	\$	\$
City		State ZIP Cod		Describe the nature of	
			Other	interest (such as fee the entireties, or a life	simple, tenancy by e estate), if known.
			Who has an interest in the property? Check one.		
A			Debtor 1 only		
Cou	unty		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	umiy property
			Other information you wish to add about this it property identification number:	em, such as local	
If you owr	or have more than one	e, list here:			
			What is the property? Check all that apply.	Do not deduct secured cla	
1.2.			☐ Single-family home	the amount of any secured Creditors Who Have Clain	d claims on Schedule D
Stre	et address, if available, or	other description	 Duplex or multi-unit building Condominium or cooperative 		
			Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
			- 🔲 Land	\$	\$
			Investment property		
City		State ZIP Cod	Timeshare	Describe the nature of interest (such as fee:	
			Other	the entireties, or a life	
			Who has an interest in the property? Check one.		
			Debtor 1 only Debtor 2 only		
Cou	inty		Debtor 1 and Debtor 2 only	O charles to the second	
			Cobion I and Debitor 2 Only	Check if this is co	mmunity property

At least one of the debtors and another

property identification number: _

Other information you wish to add about this item, such as local

(see instructions)

Document Page 12 of 92 Tyra Camille Freeman Debtor 1 Case number of kn What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 1.3. Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Condominium or cooperative Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land Investment property City ☐ Timeshare Describe the nature of your ownership State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Ford Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Escort Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2008 Year Current value of the Current value of the Debtor 1 and Debtor 2 only 87k entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see \$ 3861 \$ 3861 2008 Ford Escort (repo) instructions) If you own or have more than one, describe here: Hyundai Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Sonata Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2009 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 127k entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: \$ 4281 s 4281 Check if this is community property (see 2009 Hyundai Sonata instructions)

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Entered 08/30/17 14:26:11 Case 17-26050 Filed 08/30/17 Document Page 13 of 92 Tyra Camille Freeman Debtor 1 Case number (if known) Middle Neme Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions, Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Z No **□** Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the

instructions)

portion you own?

entire property?

Other information:

At least one of the debtors and another

Check if this is community property (see

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Desc Main

Debtor 1

Tyra Camille

Freeman

Document

Case number (if known

	art 3: Describe Your Personal and Household Items	
C	Oo you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	. Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	Yes. Describe Couch Love Seat Dining Table C - Storage	\$ <u>2750</u>
7	. Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No	
	Yes. Describe	\$
8	. Collectibles of value	7
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	
	Yes. Describe	\$
9.	Equipment for sports and hobbies	<i>i</i>
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No	
	Yes. Describe	\$
1(), Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
	Yes. Describe	\$
11	i. Clothes	ļ
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No No	

14. Any other personal and household items you did not already list, including any health aids you did not list

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,

Woman And Childrens Clothing - Storage

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

§ 3550

\$ 800

Yes. Describe.....

Yes. Describe......

13. Non-farm animals

Yes. Describe.....

Yes. Give specific information.

gold, silver

Examples: Dogs, cats, birds, horses

12. Jewelry

Z No

Z No

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Debtor 1

Tyra Camille

Freeman Document

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Case number (if known)_

	y legal or equitable interest in		Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition	ì
☑ No		the same separate on the same times you me your petition	s
manyanar -		Cash:	\$
		Casii	\$
17. Deposits of money Examples: Checking, and other s	savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit unions, brokerage ho nultiple accounts with the same institution, list each.	uses,
Q Yes		Institution name:	
	17.1. Checking account:		\$
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:	4	\$
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		
	or publicly traded stocks investment accounts with brok Institution or issuer name:	erage firms, money market accounts	
			\$
			\$
19. Non-publicly traded s an LLC, partnership, a	tock and interests in incorpo and joint venture	rated and unincorporated businesses, including an interest i	า
☑ No	Name of entity:	% of ownership:	
Yes. Give specific information about			\$
them		21	

Page 16 of 92 Document Tyra Camille Freeman Debtor 1 Case number (if known) Middle Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. V No Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: iRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☑ No Q Yes Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) JA No Issuer name and description:

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Yes. Give specific information.....

Z No

Social Security benefits; unpaid loans you made to someone else

Document Page 18 of 92 Tyra Camille Freeman Debtor 1 Case number (if known) First Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Z No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. JZ No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **Z** No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **√**Z No Yes. Describe each claim.... 35. Any financial assets you did not already list Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned Z No Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No No Yes. Describe...

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Case 17-26050 Filed 08/30/17 Entered 08/30/17 14:26:11 Page 19 of 92 Document Freeman Tyra Camille Debtor 1 Case number (if known) Middle Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Z No Yes. Describe. 41. inventory No. Yes. Describe... 42. Interests in partnerships or joint ventures Z No Yes. Describe...... Name of entity: % of ownership: 43, Customer lists, mailing lists, or other compilations Z No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe..... 44. Any business-related property you did not already list V No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46.Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **√** No

Yes....

Freeman Tyra Camille Debtor 1 48. Crops-either growing or harvested Z No Yes. Give specific information...... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Yes 50. Farm and fishing supplies, chemicals, and feed No No Yes..... 51. Any farm- and commercial fishing-related property you did not already list Z No Yes. Give specific information..... \$ 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Give specific information..... \$ O 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 0 55. Part 1: Total real estate, line 2 s 8142 56. Part 2: Total vehicles, line 5 3550 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 \$ O 60. Part 6: Total farm- and fishing-related property, line 52 **+**\$ 0 61. Part 7: Total other property not listed, line 54 \$ 11692 62. Total personal property. Add lines 56 through 61. Copy personal property total -> + \$ 11692 63. Total of all property on Schedule A/B. Add line 55 + line 62. 11692

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Fi	l in this in	forma	tion to identify your case:				
De	ebtor 1	Tyra First Na	Camille				
	btor 2						
	ouse, if filing)						
	ined States t ise number	Sankru	ptcy Court for the: NORTHER	District of ILLINOIS			
	known)						Check if this is an amended filing
					, , , , , , , , , , , , , , , , , , , 		J
Of	ficial F	orn	n 106C				
S	ched	ule	C: The Pro	perty You	Claim as Exe	mpt	04/16
Usin spac	g the prope e is neede	erty yo d, fill o	ou listed on Schedule A/B: Pri	operty (Official Form 106	ogether, both are equally respons SA/B) as your source, list the prop Additional Page as necessary. On	erty that you claim as	exempt. If more
spec of ar retir limit wou	cific dollar ny applical ement fun s the exen ld be limit	amou ble st ds—r nption ed to	ant as exempt. Alternatively atutory limit. Some exempt hay be unlimited in dollar a to a particular dollar amouthe applicable statutory am	r, you may claim the full ions—such as those for mount. However, if you ant and the value of the count.	amount of the exemption you on the proper of the property is determined to except	erty being exempted ι certain benefits, and of fair market value un	up to the amount tax-exempt nder a law that
Pa	rt 18 Id	entif	y the Property You Clair	m as Exempt			
	You ar	e clair e clair	ming state and federal nonba ming federal exemptions. 11	nkruptcy exemptions. 1 U.S.C. § 522(b)(2)	if your spouse is filing with you. I U.S.C. § 522(b)(3) npt, fill in the information below	v.	
			n of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you	claim Specific law	vs that allow exemption
	7.4			Copy the value from Schedule A/B	Check only one box for each exe	emption.	
	Brief		Couch Love Seat Dining Sable C	.	<u>-</u>	735-5/12-100	01(a)(b);
	description Line from	า: "	anec	\$ <u>2750</u>	\$ 100% of fair market value,		
	Schedule .	A/B:			any applicable statutory lin		
	Brief		Woman And Childrens			735-5/12-100	01(a)(b);
	description	н 🐧	lething	\$ 800	\$ 100% of fair market value,		
	Line from Schedule	A/B:	MA MARA PARA PARA PARA PARA PARA PARA PA		any applicable statutory lin	_14	
	Brief			\$	□ \$	***************************************	
	description Line from Schedule			*	100% of fair market value, any applicable statutory lim	up to	
			g a homestead exemption of the transfer of the transfer of 4/01/19 and every 3	-	es filed on or after the date of adju	ustment.)	
	☑ No ☐ Yes. Di ☐ No ☐ Ye)	acquire the property covered	by the exemption within	1,215 days before you filed this o	case?	

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Debtor 1

Tyra Camille

Freeman Last Name

Case number (if known)_

Additional Page

Brief description of the property a on Schedule A/B that lists this pro	and line Current value of the operty portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from	 \$	□ \$ to 100% of fair market value, up to	
Schedule A/B: Brief description:	\$	any applicable statutory limit	
Line from Schedule A/B: ————		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
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Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	s		

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Fill in this	information to identify you	ur case:					
Debtor 1	Tyra	Camille	Freeman				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing	g) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the: NO	RTHER District	of ILLINOIS	1			
Case number	r		***************************************				· F (1)
((((((((((((((((((((if this is an ed filing
O#:-:-!	. F 400D						3
	Form 106D						
Sched	dule D: Credit	tors Wh	o Have Clai	ms Secur	ed by Pro	perty	12/15
Be as comp	olete and accurate as pos	sible. If two ma	rried people are filing to	gether, both are e	qually responsible	for supplying correc	t
additional p	i. If more space is needed pages, write your name an	, copy the Addi id case number	tional Page, fill it out, n (if known).	umber the entries,	and attach it to thi	s form. On the top of	any
4 Do anu a							
	reditors have claims secu heck this box and submit th			ulaa. Vau haya sathi		Abrilla Francis	
√4 Yes. I	Fill in all of the information b	elow.	un with your other scried	ules. You have noth	ing eise to report on	this form.	
Part 1: L	ist All Secured Claims						
2. List all se	cured claims. If a creditor	has more than o	ne secured claim, list the	creditor senarately	Column A	Column B	Column C
for each o	laim. If more than one cred	litor has a partic	ular claim, list the other c	reditors in Part 2	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	as possible, list the claims i	n aipnabeticai or	der according to the cred	itor's name.	value of collateral.	claim	If any
	ler Consumer Usa	Describe	the property that secure	s the claim:	\$_3290	\$_3861	\$ 0
Creditor's N		2008 For	rd Escort (repo)				
Number	fe Snow Dr Street						
			date you file, the claim is	s: Check all that apply.	1		
North D	ichland Hills TX 76180	Contir	_				
City	State ZIP Co	Unliqu ^{de} Dispu					
Who owes:	the debt? Check one.	'	lien. Check all that apply.				
Debtor 1	•		reement you made (such as	mortgage or secured			
Debtor 2 Debtor 1		car loa	an)				
	and Debtor 2 only one of the debtors and another		ory fien (such as tax lien, me nent lien from a lawsuit	chanic's lien)			
☐ Check i	f this claim relates to a	Other	(including a right to offset) A	Auto Loan			
commu	nity debt						
Antiopedia (1906) particular consideration of	vas incurred 12/2010	Last 4 dig	gits of account number	667 	men mat hegentyt strukter eigen op en op en acher ein er en en en eneftseldet tre ei	er om en stelle i stylleggig promit rom en men om med detatistisk gib	inantened to the track the second of the
Creditor's Na	er Consumer Usa	Describe	the property that secures	the claim:	\$ <u>3290</u>	\$ <u>4281</u>	3.0
P.o. Box		2009 Hy	andai Sonata				
Number	Street		The second secon				
		As of the Contin	date you file, the claim is	: Check all that apply.			
Fort We	rth TX 76161	Unliqu					
City	State ZIP Coo	de 🔲 Disput	ed				
_	he debt? Check one.	_	lien. Check all that apply.				
Debtor 1 Debtor 2	*	An agr car loa	eement you made (such as r	mortgage or secured			
	and Debtor 2 only		rry lien (such as tax lien, med	chanic's lien)			
At least o	ne of the debtors and another	Judgm	ent lien from a lawsuit	uto			
	this claim relates to a	Other (including a right to offset)				
commur Date debt w	10/1/2011	- تعلق المعادة	its of socients . 1	000			
- AND AND INCOME AND INCOME.	dollar value of your entries	Control of the Control of Control and Control of Contro	its of account number			er ober er om er om oppresente andere er beste en	

Case 17-26050 Doc 1 Filed 08/30/17 Entered 08/30/17 14:26:11 Desc Main Document Page 24 of 92 Tyra Camille Freeman Debtor 1 Case number (if known First Name Column A **Additional Page** Column B Column C Amount of claim Part 1: Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed Do not deduct the that supports this portion by 2.4, and so forth. value of collateral. claim If any Santander Consumer Usa Describe the property that secures the claim: \$ 10429 s 6568 \$ 3861 Creditor's Name 8585 North Stemmons Freeway 2008 Ford Escort (repo) Number Suite 1100-n As of the date you file, the claim is: Check all that apply. Contingent Dallas TX 75247 ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit ☐ Other (including a right to offset) Auto Loan ☐ Check if this claim relates to a community debt Date debt was incurred 12.11.2010 Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit

Date debt was incurred _____ Last 4 digits of account number _____ Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

Other (including a right to offset)

10429 17009

Check if this claim relates to a

community debt

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Fill in this i	nformation to ide	entify your case:	Document	1 dgc 23 01 32
Debtor 1	Tyra	Camille	Freeman	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)) First Name	Middle Name	Lest Name	
United States	Bankruptcy Court fo	or the: NORTHER Distric	et of ILLINOIS	
Case number				
(If known)	***************************************			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part	1:	List All	of You	PRIORITY	Unsecure	d Claims
1. D	o any	creditor	s have p	riority unsec	ured claims	against you?

Y.	No. Go to Part 2.				
,	Yes.				
2. Li ea no	ist all of your priority unsecured claims. If a cr ach claim listed, identify what type of claim it is. If onpriority amounts. As much as possible, list the	reditor has more than one priority unsecured claim, list a claim has both priority and nonpriority amounts, list to claims in alphabetical order according to the creditor's Part 1. If more than one creditor holds a particular clai	that claim	here and show bo	th priority and
(F	or an explanation of each type of claim, see the i	instructions for this form in the instruction booklet.)			
			Total	claim Priority	Nonpriority
				amount	
2.1					
۽ لــــا	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
•	Friency Creditor's Marie	Miles was the debt in a well 10			
ī	Number Street	When was the debt incurred?			
_		As of the date you file, the claim is: Check all that app	ly		
ä	City State ZIP Code	Contingent			
1	Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Time of BBIODITY			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	Domestic support obligations			
		Taxes and certain other debts you owe the government	t		
	Check if this claim is for a community debt	Claims for death or personal injury while you were			
	s the claim subject to offset?	intoxicated			
-	No No	Other. Specify	_		
[oo oo oo ah ahaa kaa kaa kaa kaa kaa kaa kaa kaa			
2.2					
F	Priority Creditor's Name	Last 4 digits of account number	\$	<u> </u>	<u> </u>
		When was the debt incurred?			
Ñ	Number Street	An af the data constitution to the second			
		As of the date you file, the claim is: Check all that appl	y		
		Contingent			
С	City State ZIP Code	Unliquidated			
V	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	s the claim subject to offset?	Other. Specify			
	No				ļ
Ļ	Yes				

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I set Name

Last Name

Las Tyra Camille Debtor 1 Part 1: Your PRIORITY Unsecured Claims - Continuation Page

r listing any entries on this page, number ther	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
Prionty Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	-			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
in the claim exhibit to affect?	Other. Specify			
is the claim subject to offset?				
☐ Yes				
ti talahin tetatan silanggana binaman menenti dari teta termin bermalanggan terpangkangan tenan menengkan kecab			***************************************	\$
Priority Creditor's Name	Last 4 digits of account number	Φ	\$	Ф
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Check it this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
□ No				
Types	1.176 + 1.00 +	odno i trekultu go e nomonek et omga et gent o tretty, etto et e	ette estilatekkallaktarlaktik (** = teorer).	e = 1525ec 1962 875 = 625 15 c 175 265
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
The second of the second	When was the debt incurred?			
Number Street	Mueu Mas dis dept Bichiled (
	As of the date you file, the claim is: Check all that apply.			
Sib.	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	inter" 5 m – 11 m. in mingling, alekses benegsskastineler.	utilisen zaititetusi kennentyy et eseg degenpiaja aj agai	etten kantenserretten dan 1 (1720-1835) eta
s the claim subject to offset?				
☐ No				
Yes				

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First Name Middle Name Last Name Page 27 of 92

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Debtor 1

Tyra Camille

Part 2: List All of Your NONPRIORITY Unsecured Claims

2	Do any graditors have nonvierity unacquied deime and inch		
; 3. [Do any creditors have nonpriority unsecured claims against yo No. You have nothing to report in this part. Submit this form to the		
ĺ	Yes Yes	le court with your other schedules.	
1 (1) (1) 1 (1) (1)	ANALYSIS CONTROL OF THE STATE O		
S 1. 1.	List all of your nonpriority unsecured claims in the alphabetical nonpriority unsecured claim, list the creditor separately for each claim	T. For each claim listed, identify what type of claim it is. Do not	liet claime already
1 1	included in Part 1. If more than one creditor holds a particular claim,	list the other creditors in Part 3.If you have more than three no	npriority unsecured
11.1	claims fill out the Continuation Page of Part 2.	A Company of the Comp	
<u>. </u>			Total claim
4.1	Acceptance Now	Last 4 digits of account number 7080	
	Nonpriority Creditor's Name	Martine princery wronger should	\$_3212
	905 Perimeter Dr	When was the debt incurred? 11/30/2016	
	Number Street Schaumburg IL 60173		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	Ø No	Other. Specify Collection	
	Yes		
4.2	Acceptance Now	Last 4 digits of account number 2409	\$ 3427
	Nonpriority Creditor's Name	When was the debt incurred? 9/2016	
	5501 Headquarters Dr	-	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Plano TX 75024 City State ZIP Code		
		☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☑ No	Other. Specify Collection	
	Yes		
4.3	A count on the Nove		and the second of the second o
	Acceptance Now Nonpriority Creditor's Name	Last 4 digits of account number 2409	\$ 3441
	5501 Headquarters Drive	When was the debt incurred? 9/11/2016	
	Number Street		
	Plano TX 75024 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	;
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only Debtor 2 only	☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	:
	·	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset? 2 No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	

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Debtor 1

Part 2:

Account Resolution Service	Last 4 digits of account number 19	s 409
Nonpriority Creditor's Name Po Box 459079	When was the debt incurred? 5/19/2015	5 402
Number Street	NAME OF THE PARTY	
Sunrise FL 33345	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a community debt	you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? ☑ No ☑ Yes	Other. Specify <u>Medical</u>	
от не пода нем вына нучавания объем не	Last 4 digits of account number 7316	**************************************
Account Resolution Service Nonpriority Creditor's Name	Last 4 digits of account fightipe)	\$ 01
1643 North Harrison Pkwy Building H Suite 100	When was the debt incurred? 05.25.2014	
	As of the date you file, the claim is: Check all that apply.	
Sunrise FL 33323 Dity State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
☐ Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Medical	
Ó No D Yes		
Account Resolution Service	Last 4 digits of account number 7368	\$ <u>397</u>
onpriority Creditor's Name	When was the debt incurred? 9.22.2014	
1643 North Harrison Pkwy Building H Suite 100 umber Street	As of the date you file, the claim is: Check all that apply.	
Sunrise FL 33323 thy State ZiP Code		
ity State ZiP Code	Contingent	
Vho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONDBIODITY unanasymptotics	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Me	

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Debtor 1

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Tot	al claim	
Total claims	6a	Domestic support obligations	6a.	\$	0	
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$	0	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0	
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0	
				Tota	al claim	
Total claims	6f.	Student loans	6f.	\$	249548	
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0	
		Other. Add all other nonpriority unsecured claims. Write that amount here.	6 i.	+ \$	52237	
	6j. *	Total. Add lines 6f through 6i.	6j.	\$	301785	

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:	F	- 1		ē	r	4	
			ж		ь	81	į

Account Resolution Service	Last 4 digits of account number 8001	\$ 409
Nonpriority Creditor's Name 1643 North Harrison Pkwy Building H Suite 100	When was the debt incurred? 5.19.2015	Ψ <u>49</u>
Number Street	As of the date you file, the claim is: Check all that apply.	
Sunrise FL 33323 State ZiP Code		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Contingent☐ Unliquidated☐ Disputed☐ Disputed☐ Type of NONPRIORITY unsecured claim:☐ Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
ls the claim subject to offset? ☑ No ☑ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify <u>Medical</u>	
	Last 4 digits of account number 8699	s 145
Allied Interstate Lic Nonpriority Creditor's Name	00 01 504 C	Ψ
7525 W. Campus Rd	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply.	
New Albany OH 43054 City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
☑ No ☑ Yes	Cities. Speeding Citatit Calif	
Ars	Last 4 digits of account number41	\$ <u>27</u>
Nonpriority Creditor's Name Po Box 459079	When was the debt incurred? 1/26/2015	
Number Street Sunrise FL 33345	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Alba imanumad the debto Office	Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? 1 No	Other. Specify Medical	

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ш	٤.	ц.	ь.	2

	t not 4 digita of against some 5 and 31	
Ars Nonpriority Creditor's Name	Last 4 digits of account number 21	\$ <u>397</u>
Pop Box 459079	When was the debt incurred? 9/22/14	
Number Street	As of the date you file, the claim is: Check all that apply.	
Sunrise FL 33345 City State ZIP Code	·	
Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset? ☑ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
retirementalista distribution (most consistencia intercenta hasanta) que managente miser esta destructura en consistencia destructura anascente, es esculuir esta destructura de esta destructura de esta	Last 4 digits of account number	**************************************
Nonpriority Creditor's Name	When was the debt incurred 3 5/25/14	
Po Box 459079	When was the debt incurred? 5/25/14	
Number Street	As of the date you file, the claim is: Check all that apply.	
Sunrise FL 33345 City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Tuno of MONRDIODITY	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	 □ Student loans □ Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a community debt	you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? Ź No ☑ Yes	✓ Other. Specify <u>Medical</u>	
Baxter Credit Union	Last 4 digits of account number 3860	\$ <u>475</u>
tonpriority Creditor's Name 400 North Lakeview Parkway The Street	When was the debt incurred? 5/2011	
iumber Street Vernon Hills IL 60061	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
7 a	you did not report as priority claims	
J Check if this claim is for a community deht		
Check if this claim is for a community debt the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collection	

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Elist Name Middle Name Instrument Ins

Debtor 1

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1	•	г	•	•	ж.	9
1	-		я.	1	7	4

C. H. A.d.	Last 4 digits of account number 8533	\$ 11000
Nonpriority Creditor's Name	4/5 ° 11 4	Ψ <u>11000</u>
655 Deerfield Rd.	When was the debt incurred? 4/25/14	
Number Street Decrfield IL 60015	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Residential	
Ź i No □ Yes		
C.h.a.d	Last 4 digits of account number 8533	\$ 8753
Nonpriority Creditor's Name	When was the debt incurred? 4.25.14	
655 Deerfield Rd Suite 100-300	when was the dept incurred?	
Deerfield IL 60015	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
☐ Debtor 1 only	₩ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Residential	
Ó No ☑ Yes	· · · · · · · · · · · · · · · · · · ·	
	Last 4 digits of account number 8801	\$ <u>75</u>
Caine & Weiner Ionpriority Creditor's Name	- Service of appoint fightings	
15025 Oxnard Street Suite 100	When was the debt incurred? 03.06.2013	
Van Nuys CA 91411	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify (retail) 	

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Part 2:

listing any entries on this page, number them beginning wi	th 4.4, followed by 4.5, and so forth.	Total c
Caine & Weiner Company Inc	Last 4 digits of account number 01	\$ <u>75</u>
ionpriority Creditor's Name 1699 E. Woodfield Rd. Ste 360	When was the debt incurred? 3/6/2013	
umber Street	As of the date you file, the claim is: Check all that apply.	
Schaumburg IL 60173 ity State ZIP Code	□ Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Collection	
Íno Iyes	The second secon	
		PANON BIAN WELLOW (And a place was store
Cmi	Last 4 digits of account number	_{\$} 120
onpriority Creditor's Name	0.1.012	T
200 International Parkway	When was the debt incurred?	
umber Street	As of the date you file the electric to the bound of	
Carrollton TX 75007	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
/ho incurred the debt? Check one.	Unliquidated	
•	☐ Disputed	
Debtor 1 only Debtor 2 only	Time of MONOPIONITY	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Utility	
) No	Outer, Specify Office	
Yes		
Comcast	Last 4 digits of account number 9133	\$ <u>278</u>
oncast npriority Creditor's Name	- William white and a state of the state of	
o Box 64378	When was the debt incurred? 12/11/2016	
mber Street	A of the defendence of the state of the stat	
aint Paul MN 55164	As of the date you file, the claim is: Check all that apply.	
y State ZIP Code	☐ Contingent	
he incurred the debt? Cheek our	Unliquidated	
ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
one of the commonty debt	Dobto to popular as profit at advantage and the	
the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collection	

Part 2:

Credit Management	Last 4 digits of account number <u>08</u>	\$ 120
Nonpriority Creditor's Name 2121 Noblestown Rd Number Street	When was the debt incurred? 9/1/2015	,
Number Street Pittsburg PA 15205	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one. ✓ Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection 	
2 No ☐ Yes	Coner. Specify Confection	
Credit Protection	Last 4 digits of account number	s 171
Nonpriority Creditor's Name	12/10/2016	Ψ
13355 Noel Rd 21st Flr Number Street	when was the dept incurred?	
Dallas TX 75240	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	•	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans Ohigotions sylicing out of a conception and additional actions and additional actions are additional actions.	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utilites	
Ź No ☑ Yes	Orier. Specify <u>Utilites</u>	
	Last 4 digits of account number _ 9218	\$ <u>644</u>
Creditors Discount & Aud Impriority Creditor's Name		
415 E. Main Street	When was the debt incurred? 9.23.2014	
lumber Street Streator IL 61364	As of the date you file, the claim is: Check all that apply.	
Streator IL 01304 State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other Specify Medical	

Tyra Camille
First Name Middle Name

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Creditors Discount & Aud	Last 4 digits of account number 9218	\$ 337
Nonpriority Creditor's Name 415 E. Main Street	When was the debt incurred? 9.23.2014	Ф <u>ЈЈ</u> /
Number Street	As of the data you file the state for China Hall	
Streator IL 61364	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset?	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical 	
Ź No ⊇ Yes Creditors Discount & Aud Hoppionity Creditor's Name	Last 4 digits of account number 92m7	\$ 371
415 E. Main Street	When was the debt incurred?	
lumber Street	As of the date you file, the claim is: Check all that apply.	
Streator IL 61364 City State ZIP Code		
, State ZIF COOR	☐ Contingent ☐ Unliquidated	
Vho incurred the debt? Check one.	Disputed	
Debtor 1 only	- Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? No Yes	Other. Specify Medical	
Department Of Education	Last 4 digits of account number	\$ <u>11796</u>
onpriority Creditor's Name 1 Forsyth St Sw Ste 19t40	When was the debt incurred? 12/2014	
umber Street Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
the beautiful debit of	Unliquidated	
/ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	- Depta to pension DE DITHESNATION DISPS 980 NIBER SIMILAR ACASE	
the claim subject to offset? No	Other, Specify Education	

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Department Of Education	Last 4 digits of account number 2139	\$ <u>1777</u>
Ionpriority Creditor's Name 61 Forsyth St Sw Ste 19t40 Jumber Street	When was the debt incurred? 12/2014	
Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
State ZIP Code	Contingent Unliquidated	
Vho incurred the debt? Check one. Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	✓ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify College	
Á No I Yes		
Department Of Education	Last 4 digits of account number	s 1907
onpriority Creditor's Name	11/2016	*
1 Forsyth St Sw Ste 19t40 umber Street	when was the debt incurred?	
Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
/ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify_College	
No 1 Yes	Outer. Specify Conege	
	Last 4 digits of account number 2139	\$ <u>3947</u>
Department Of Education On priority Creditor's Name		
1 Forsyth St Sw Ste 19t40 umber Street	When was the debt incurred? 11/2016	
stlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
ho incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	□ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
•	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify College	
the claim subject to offset?		

Part 2:

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Department Of Education	Last 4 digits of account number 2139	\$ 3459
Nonpriority Creditor's Name	When was the debt incurred?11/2016	·
61 Forsyth St Sw Ste 19t40 Number Street	An of the date were the three that the same	
Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated Disputed	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	🗹 Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify_College	
☑ No	Other, Specify Correge	
Yes		
Department Of Education	Last 4 digits of account number	\$ 6221
Nonpriority Creditor's Name	11/05/2016	
61 Forsyth St Sw Ste 19t40	When was the debt incurred?	
Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
✓ No	Other. Specify <u>Education</u>	
☐ Yes		
	Lant A digita of account number 2120	\$ <u>3459</u>
Department Of Educations Nonpriority Creditor's Name	Last 4 digits of account number 2139	
61 Forsyth St Sw Ste 19t40 Number Street	When was the debt incurred? 12/2014	
Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	∠	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	Other, Specify College	

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Debtor 1

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Dept. Of Education Nonpriority Creditor's Name	Last 4 digits of account number 46	\$ <u>6221</u>
61 Forsyth St Sw Ste 19t40	When was the debt incurred? 4/2016	
Number Street	An of the date was till the element to the second	
Atlanta GA 30303	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset? ŹINO ☐ Yes	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Education</u> 	
Dept. Of Education Nonpriority Creditor's Name	Last 4 digits of account number	\$ <u>3459</u>
61 Forsyth St Sw Ste 19t40	When was the debt incurred? 9/08/2011	
Automos IV 20202	As of the date you file, the claim is: Check all that apply.	
Atlanta II. 30303 City State ZIP Code	Contingent	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? Í No I Yes	Other. Specify <u>College</u>	
Dept. Of Education	Last 4 digits of account number	\$ <u>3947</u>
onpriority Creditor's Name 51 Forsyth St Sw Ste 19t40	When was the debt incurred? 7/20/2010	
umber Street	As of the date you file, the claim is: Check all that apply.	
Atlanta GA 30303 ity State ZIP Code	Contingent	
Who incurred the debt? Check one. Debtor 1 only	☐ Unliquidated☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a community debt	poul did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	

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Debtor 1

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Dept. Of Education	Last 4 digits of account number	\$ <u>1907</u>
lonpriority Creditor's Name 61 Forsyth St Sw Ste 19t40	When was the debt incurred? 7/20/2010	-
Jumber Street	And Andread Angelong and Angelo	
Atlanta IL 30303	As of the date you file, the claim is: Check all that apply.	
State ZIP Code	Contingent	
	☐ Unliquidated	
Vho incurred the debt? Check one.	Disputed	
Debtor 1 only	- Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
. · · · · · · · · · · · · · · · · · · ·	Other. Specify <u>College</u>	
ΏNo]Yes		
J Yes		
Nivest Year Sus Sustance	Last 4 digits of account number 9183	s 5626
Direct Loan Sys Systems onpriority Creditor's Name	**************************************	Φ
	When was the debt incurred? 11.14.2008	
C.o. Box 5609 umber Street		
	As of the date you file, the claim is: Check all that apply.	
Greenville TX 75403		
ity State ZIP Code	Contingent	
/ho incurred the debt? Check one.	Unliquidated	
	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other, Specify Student Loan	
Í No		
l Yes		
ann ag mail the similar for an ing profession and the similar to t		laterija et er kall sed klasteljena, sa
Direct Loan Svs Systems	Last 4 digits of account number 9183	\$ <u>9792</u>
DIFFECT LOAN SVS SYSTEMS On priority Creditor's Name	And the second s	
	When was the debt incurred? 11.14.2008	
Lo. Box 5609 Imber Street		
	As of the date you file, the claim is: Check all that apply.	
Greenville TX 75403 State ZIP Code		
State ZIP Code	Contingent	
ho incurred the debt? Check one.	Unliquidated	
	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	🗹 Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
опоска ина сіани із тога сопшицину церц	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Student Loan	
No	· · · · · · · · · · · · · · · · · · ·	

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Last 4 digits of account number 3706 \$15442			
When was the debt incurred? 11.14.2008	Direct Loan Svs Systems	Last 4 digits of account number 3706	\$ <u>15442</u>
As of the date you file, the claim is: Check all that apply. Corentypent Uniquadated Uniquada		When was the debt incurred? 11.14.2008	
Who incurred the debt? Check one. Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 6 onl			
Contingent Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only No		As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only		Contingent	
Disputed			
Debtor 1 only			
□ Petor 1 and Debtot 2 only	Debtor 1 only	,	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Debtor 2 only Poble of 2 only Debtor 2 only At least one of the debtors and another Debtor 2 only Poble of 3 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another Colligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor Systems Debtor Systems Contingent Contingent Contingent Contingent Debtor 1 and Debtor 2 only Pas Diversified Services Inc Contingent Cont	Debtor 1 and Debtor 2 only		
Check if this claim is for a community debt			
Debts to pension or profits-haring plans, and other similar debts	7 Charles at the state of the s	vou did not report as priority claims	
Steet Loan Svs Systems	Uneck if this claim is for a community debt		
No			
Direct Loan Svs Systems Norporomy Creditor's Name P.o. Box 5609 Number Siceet Creenville TX 75403 City State ZIP Code When was the debt incurred? As of the date you file, the claim is: Check all that apply. Creenville TX 75403 City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Diversified Services Inc Nonpromy Creditor's Name Zisto E Devon Ave Number Sizeet Des Plaines IL 60018 City State ZIP Code When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: State I digits of account number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Contingent Unliquidated Disputed Student loans Contingent Unliquidated Disputed Student loans Contingent Unliquidated Disputed Contingent Student loans Contingent Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 only Debtor 3 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 5 onesion or profit-sharing plans, and other similar debts Debtor 5 onesion or profit-sharing plans, and other similar debts Debtor 5 onesion or profit-sharing plans, and other similar	∕ i No	· · · · · · · · · · · · · · · · · · ·	
Nonpriority Creditor's Name Name Name Street As of the date you file, the claim is: Check all that apply.			
Nonpriority Creation's Name Name Name Street Street As of the date you file, the claim is: Check all that apply		ntra dimmanda kanada na angalaha-ma-anga-apalanga kanada kanada kanada kanada kanada kanada kanada kanada kanad 2706	met keenstelis kuningaa, yahanin ta agaalar
Number Street S	Direct Loan Svs Systems	Last 4 digits of account number 3/00	\$_1239(
P.o. Box 5609 Number Street Greenville TX 75403 City State ZIP Code Contingent Unliquidated Disputed Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Yes Diversified Services Inc Variety Street Des Plaines IL 60018 Zity State ZIP Code When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Student Loan When was the debt incurred? 5.7.2014 As of the date you file, the claim is: Check all that apply. Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Contingent Unliquidated Disputed As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Disputed Other. Specify Medical As of the date you file, the claim is: Check all that apply. Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	Ionpriority Creditor's Name	When was the dobt in	
As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Street Diversified Services Inc Norpromy Creditor's Name 2250 E Devon Ave Number Street Des Plaines IL 60018 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. State ZIP Code Who incurred the debt? Check one. Des Plaines IL 60018 As of the date you file, the claim is: Check all that apply. State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Street As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Unliquidated Disputed As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Disputed Contingent Unliquidated Disputed Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Disputed Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor		when was the dept incurred?	
Contingent Creenville X 75403	lumber Street	As of the date you file, the claim is: Check all that again.	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Diversified Services Inc Diversified Services Inc Who incurred the debt? Check one. Debtor 1 only Debtor 1 ond Debtor 2 only As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt State ZIP Code Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State claim subject to offset? Uniquidated Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Debtor 4 only Debtor 5 and Debtor 2 only At least one of the debtors and another Debtor 5 and Debtor 2 only At least one of the debtors and another Debtor 5 and Debtor 2 only At least one of the debtors and another Debtor 5 and Debtor 2 only Debtor 6 and Debtor 2 only Debtor 7 and Debtor 2 only At least one of the debtors and another Debtor 6 and Debtor 2 only Debtor 7 and Debtor 8 and other similar debts Debtor 8 and other similar debts Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and Debtor 9 and other similar debts Debtor 9 and Debtor 9 and Other 9 and			
Who incurred the debt? Check one. □ Disputed □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim subject to offset? □ No □ Yes □ Diversified Services Inc □ Diversified Services Inc □ Check If this claim is for a community debt □ Debtor 1 and Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 1 only □ Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 4 only □ Debtor 5 and Debtor 2 only □ Debtor 5 and 5 an	ity State ZIP Code	· ·	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Student loans Debtor 3 and pebtor 3 and in the result of the debtors and another Debtor 4 and Debtor 2 only Diversified Services Inc Nonpriority Creditors Name Diversified Services Inc Nonpriority Creditors Name Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts State Despective Student Loan S1079 Last 4 digits of account number 4293 S1079 When was the debt incurred? S.7.2014 As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Steel Loam subject to offset?	Nho incurred the debt? Check one	· ·	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Student Loan □ Other. Specify Medical □ Other. Specify Medical □ Other. Specify Medical		☐ Disputed	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Student Loan □ Other. Specify Medical □ Other. Specify Medical		T(MONORIATION	
□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Diversified Services Inc □ Check if this claim is for a community debt □ Yes □ Diversified Services Inc □ Last 4 digits of account number 4293 \$1079 □ When was the debt incurred? 5.7.2014 □ As of the date you file, the claim is: Check all that apply. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		II	
□ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Student Loan □ Other. Specify Medical □ Other. Specify Medical □ Other. Specify Medical □ Other. Specify Medical			
□ Check if this claim is for a community debt Is the claim subject to offset? □ Other. Specify Student Loan □ Other. Spec	At least one of the deptors and another	Obligations arising out of a separation agreement or divorce that	
Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student Loan Other. Specify Student Loan Other. Specify Student Loan Student Loan Student Loan Other. Specify Student Loan Student Loan Other. Specify Student Loan Other	Check if this claim is for a community debt	you did not report as priority claims	
State Specified Services Inc Last 4 digits of account number 4293 \$1079			
Diversified Services Inc Nonpriority Creditor's Name 2250 E Devon Ave Number Street Des Plaines IL 60018 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? Last 4 digits of account number 4293 When was the debt incurred? 5.7.2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts other. Specify Medical	_	U Other. Specify <u>Student Loan</u>	
Diversified Services Inc Nonpriority Creditor's Name 2250 E Devon Ave Number Street Des Plaines IL 60018 City State ZIP Code Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? Last 4 digits of account number 4293 When was the debt incurred? 5.7.2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical			
Diversified Services Inc Nonpriority Creditor's Name 2250 E Devon Ave Number Street Des Plaines IL 60018 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? Last 4 digits of account number 4293 When was the debt incurred? 5.7.2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical			\$ 1 07 0
When was the debt incurred? 5.7.2014 As of the date you file, the claim is: Check all that apply. Des Plaines IL 60018 City State ZIP Code Contingent Unliquidated Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? When was the debt incurred? 5.7.2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical		Last 4 digits of account number 4293	* <u>10/7</u>
As of the date you file, the claim is: Check all that apply. Des Plaines IL, 60018 Other Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts sthe claim subject to offset?	onpriority Creditor's Name	Milhon was the debt in the ID 5 7 2014	
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		vinen was the debt incurred? 5./.2014	
City State ZIP Code Contingent Unliquidated Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Student loans Check if this claim is for a community debt s the claim subject to offset? State ZIP Code Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	umber Street	As of the date you file the claim in: Check all that are le	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			
Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts the claim subject to offset? Other, Specify Medical	ity State ZIP Code		
Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	Who incurred the debt? Check onc		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ■ Check if this claim is for a community debt ■ Check if this claim subject to offset? Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical	,	■ Disputed	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts s the claim subject to offset? ☐ Other, Specify Medical			
At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts the claim subject to offset? Other, Specify Medical		Type of NONPRIORITY unsecured claim:	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	•	☐ Student loans	
☐ Check if this claim is for a community debt ☐ Debts to pension or profit-sharing plans, and other similar debts s the claim subject to offset? ☐ Other, Specify Medical	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
s the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical	Check if this claim is for a community debt	you did not report as priority claims	
	·		
		Other. Specify Medical	

Part 2:

		0050 V (v) (005000
Dr. Clifford Swanson	Last 4 digits of account number 4588	\$_1300_
Nonpriority Creditor's Name 2215 W. Schaumburg Rd Number Street	When was the debt incurred? 2015	
Schaumburg IL 60194	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	Other. Specify Medical	
✓ No □ Yes		
Enterprise Rent-a-car	Last 4 digits of account number	\$ 501
Nonpriority Creditor's Name	When was the debt incurred?	
2031 N. State St. Number Street	-	
Belvidere IL 61008	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? 🗖 No	Other. Specify Rental	
Yes	Last 4 digits of account number 65n1	\$ <u>105</u>
Federated Collection Bureau Nonpriority Creditor's Name	Last 4 digits of account number	
3250 Peachtree Corners Circle Suite F Number Street	When was the debt incurred? 7/14/2015	
Norcross GA 30092	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Residential	

Part 2:

Great Lake Higher Education	Last 4 digits of account number 9079	p 18025
Nonpriority Creditor's Name	When was the debt incurred? 05/2012	\$ <u>17853</u>
Po Box 7860 Number Street	Aniel was the dept inclined i	
Madison WI 53707	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one. Debtor 1 only	Unliquidated Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No □ Yes	Other. Specify College	
Creat Lakes Higgs Education	Last 4 digits of account number 9079	**************************************
Great Lakes Higer Education Nonpriority Creditor's Name	07/2010	*
Po Box 7860	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Madison WI 53707 City State ZIP Code	-	
State ZIF Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	- Jopans	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☑ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
Ź No	Other. Specify <u>College</u>	
☐ Yes		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
I.c. Systems Inc.	Last 4 digits of account number 33	\$ <u>278</u>
Nonpriority Creditor's Name	Milhan upo the debt income 40 10/21/2014	
444 Highway 96 E	When was the debt incurred? <u>10/31/2014</u>	
Number Street	As of the date you file, the claim is: Check all that apply.	
Saint Paul MN 55127 State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	•	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset? 1/No	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collection	

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Last Name Middle Name Last Name Last Name

Debtor 1

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er listing any entries on this page, number them beginning v	vith 4.4, followed by 4.5, and so forth.	Total cla
Ic Systems Collections	Last 4 digits of account number 6719	\$_278
Nonpriority Creditor's Name 444 Hwy 96 E	When was the debt incurred? 9.13.2016	-
Number Street	A of the date on the theory	
Saint Paul MN 55127	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Utility	
∠ No		
☐ Yes		
on the whole and the state of t	Last 4 digits of account number 1264	**************************************
Imataz Carbide Nonpriority Creditor's Name	Last 4 digits of account flumber	\$_3700
• •	When was the debt incurred?	
2315 West Devon Ave	AND	
Chicago IL 60659	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
✓ No	Other. Specify Residential	
Yes		
		\$ 935
Imtiaz Carbide	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 1/11/2017	
2315 W. Devonave #2 Number Street	# 1.3.27 #V.3.1	
	As of the date you file, the claim is: Check all that apply.	
Chicago IL 60659 City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	·	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other, Specify Residential	
₩ No		

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	1 and 4 digita of a	100000000000000000000000000000000000000
Miramed Revenue Group Nonpriority Creditor's Name	Last 4 digits of account number 2053	\$ <u>597</u>
360 E 22nd St	When was the debt incurred? 4.18.2016	
Lombard IL 60148	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one.	Contingent Uniquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Medical	
Ó No ☐ Yes		
	Last 4 digits of account number 9156	\$ 49
Miramed Revenue Group Ionpriority Creditor's Name	- i	\$
P.o. Box 77000 Dept. 77304 lumber Street	When was the debt incurred?	
Detroit MI 48277	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	□ bisputeo	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? Í No I _{Yes}	Other. Specify Medical	
TES		\$ 133
Quest Diagnostics Onpriority Creditor's Name	Last 4 digits of account number 2830	Y <u>+3/3/</u>
Po Box 740397 umber Street	When was the debt incurred? 11.7.16	
Cincinnati OH 45274-0397	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
/ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Medical	

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Debtor 1

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Radiological Consultants	Last 4 digits of account number 7815	s 644
Nonpriority Creditor's Name 415 E Main Street Number Street	When was the debt incurred? 12/1/2014	*
Number Street Streator IL 61634	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
🗖 Debtor 1 only	- Disposed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	☑ Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Medical	
Ó No □ Yes		
Radiological Concultante	Last 4 digits of account number 7816	* 337
Radiological Consultants Nonprionty Creditor's Name	12/1/2014	· , ,
415 E Main Street	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply.	
Streator IL 61364 ity State ZIP Code	☐ Contingent	
, Sidio Eli Odde	Unliquidated	
Vho incurred the debt? Check one.	Disputed	
Debtor 1 only	we Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical 	
∆ No	Other, Specify Wietical	
Yes		
	Last 4 digits of account number	\$ <u>371</u>
Radiological Consultants onpriority Creditor's Name	Last 4 digits of account number	
115 E. Main Street	When was the debt incurred? 07/2015	
umber Street Streator IL 61364	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
the foreign date of the Co.	Unliquidated	
/ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other, Specify Medical	

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		93849033
Rent Recover Llc	Last 4 digits of account number 2280	\$_701
Ionpriority Creditor's Name 220 Gerry Dr	When was the debt incurred? 10.29.2014	
lumber Street		
Wood Dale IL 60191	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Residential	
1 No	Outer, Specify Acsidential	
Rent Recover Of Better Noi onpriority Creditor's Name	Last 4 digits of account number 2011	\$ <u>701</u>
	When was the debt incurred? 10/29/2014	
20 Gerry Drive	Anen was the dept sichlied :	
Wooddalle 1L 60191	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
/ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Residential	
No		
Yes		manda a didikiliki da da mijilingga ara kaliya ara sa sa
outhwest Credit	Last 4 digits of account number 8101	\$ <u>171</u>
Inpriority Creditor's Name	When was the debt incurred? 2013	
120 International Pkwy Suite 1100		
Carrollton TX 75007	As of the date you file, the claim is: Check all that apply.	
y State ZIP Code	Contingent	
ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Utilities	
l No		

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Part 2:

Southwest Credit Systems	Last 4 digits of account number 56	\$ 278
onpriority Creditor's Name 2629 Dickerson Pkwy	When was the debt incurred? 1/18/2016	\$ <u>2/8</u>
lumber Street		
Carrellton TX 75007	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
	Unfiguidated	
Vho incurred the debt? Check one,	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other. Specify Collection	
Yes		
	Last 4 digits of account number	**************************************
Sprint pripriority Creditor's Name		\$_250
	When was the debt incurred? 7.1.2017	
200 Sprint Parkway umber Street		
Overland Park KS 66251	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
	Unliquidated	
/ho incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other, Specify <u>Utility</u>	
l No l Yes		
ert trensk treste for til er forste for i til forste forst	Last 4 digits of account number 6216	\$ <u>171</u>
w Credit Systems Impriority Creditor's Name	address of social refined	
	When was the debt incurred? 1.18.2017	
120 International Pkwy Ste 1100 mber Street	Maryun.	
Carrollton TX 75007	As of the date you file, the claim is: Check all that apply.	
y State ZIP Code	☐ Contingent	
to the second second	☐ Unliquidated	
ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Utility	

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	14	•
100	444	

Syncb Lord & Taylor Nonpriority Creditor's Name	Last 4 digits of account number 4082	\$ <u>0</u>
Po Box 965015 Number Street	When was the debt incurred? 10/2008	
Orlando FL 32896	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collection 	
Syncb/lord & Taylor	Last 4 digits of account number	militar danis (molilling parting any dissure).
Nonpriority Creditor's Name	When was the debt incurred? 03.01.2000	
P.o. Box 965015 Number Street	· · · · · · · · · · · · · · · · · · ·	
Orlando FL 32896	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Disputed Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
ls the claim subject to offset? ☑ No ☑ Yes	Other. Specify Credit Card	
The Cbe Group Inc - Former Nonpriority Creditor's Name	Last 4 digits of account number	\$ <u>397</u>
131 Tower Park Drive	When was the debt incurred? 12,28,2010	
Number Street	As of the date you file, the claim is: Check all that apply.	
Waterloo ID 50704 City Stale ZIP Code	Contingent	
,	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
	Debts to pension or profit-sharing plans, and other similar debts Other. Specify. Utility	

Tyra Camille
First Name Middle Name

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United Healthcare Insurance Co Nonpriority Creditor's Name	Last 4 digits of account number 3344	\$ <u>30</u>
P.o. Box 740800 Number Street	When was the debt incurred? 5.23.2017	
Atlanta GA 30374	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed	
Debtor 1 only	·	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check If this claim is for a community debt	Obligations arising out of a separation agreement or divorce you did not report as priority claims	
s the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar de Other. Specify Medical 	bts
Ź No ☑ Yes	Guid. Specify Nitural	
	Last 4 digits of account number	s 9792
Us Department Of Edu Afsa Norpriority Creditor's Name		\$_7/72
1101 17th Street, N.w. Suite 408	When was the debt incurred?	
Washington DC 20036	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	☐ Contingent	
Vho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce tyou did not report as priority claims 	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar det	ots
No Yes	Other. Specify Education	
Us Department Of Edu Afsa	Last 4 digits of account number 3374	\$ <u>5626</u>
onphonity Creditor's Name		
101 17th Street Nw Suite 408 umber Street	When was the debt incurred? 11/14/2008	
Washington DC 20036	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent	
Vho incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
Debtor 1 only	→ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	🗹 Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce the you did not report as priority claims 	at
1 Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar deb	ts
the claim subject to offset? Í _{No} I _{Yes}	Other. Specify Education	

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Last Name Middle Name Last Name

Debtor 1

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Us Department Of Edu Afsa Nonpriority Creditor's Name	Last 4 digits of account number 6712	\$ <u>15442</u>
1101 17th Street Nw Suite 408	When was the debt incurred? 11/1/2008	
Washington DC 20036	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one. ☐ Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce the you did not report as priority claims 	at
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	.
s the claim subject to offset?	Other. Specify Education	,
Ó No D Yes		
	Last 4 digits of account number 6711	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Js Department Of Edu Afsa onpriority Creditor's Name		\$_12390
101 17th Street Nw Suite 408 umber Street	When was the debt incurred? 11/01/2008	
Washington DC 20036	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
/ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	✓ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce tha	t
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Education</u> 	
No 1 Yes	AND ADDRESS OF THE PARTY OF THE	
	and the state of t	\$ <u>1777</u>
S Department Of Education Suppriority Creditor's Name	Last 4 digits of account number 31	
00 Maryland Ave Sw umber Street	When was the debt incurred? 9/1/13	
Vashington DC 20202	As of the date you file, the claim is: Check all that apply.	
y State ZIP Code	☐ Contingent	
ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 1 only Debtor 2 only	Typo of NONDRIORITY uppersured electric	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset? No	Other. Specify College	

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Tyra Camille
First Name Middle Name Last Name

Last Name Last Name Last Name

Last Name Last Name Last Name Last Name

Debtor 1

Part 2:

Us Department Of Education Nonpriority Creditor's Name	Last 4 digits of account number 32	\$ 11 7 96
400 Maryland Ave Sw	When was the debt incurred? 9/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
Washington DC 20202 City State ZIP Code		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset?	☐ Contingent☐ Unliquidated☐ Disputed☐ Disputed☐ Disputed☐ Disputed☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify Education☐	
Yes Us Department Of Education Improved Control of Co	Last 4 digits of account number 9581	\$ <u>17853</u>
400 Maryland Ave Sw	When was the debt incurred?	
lumber Street	As of the date you file, the claim is: Check all that apply.	
Washington DC 20202 iity State ZIP Code	Contingent	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset? 1 No 1 Yes	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify <u>Education</u>	
Us Department Of Education	Last 4 digits of account number 8581	\$ <u>10546</u>
onpriority Creditor's Name 100 Maryland Ave Sw	When was the debt incurred? 10/1/2013	
umber Street	As of the date you file the status to see a second	
Washington DC 20202	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	Contingent	
/ho incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Education 	

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Us Department Of Education Nonpriority Creditor's Name	Last 4 digits of account number 46	\$ <u>6221</u>
400 Maryland Ave Sw	When was the debt incurred? 11/14/2008	
Number Street Washington DC 20202	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	TorresCNONODIODITY	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other Specify Education	
Źi No □ Yes		
under visite in the contract of the contract o	Last 4 digits of account number	**************************************
Us Department Of Education Inpriority Creditor's Name	0/0/2015	T
400 Maryland Ave Sw	When was the debt incurred? 9/8/2011	
lumber Street	As of the date you file, the claim is: Check all that apply.	
Washington DC 20202 ify State ZIP Code	· · ·	
	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	···· seeparate	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	✓ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other. Specify <u>Education</u>	
Yes		
		\$ 3947
Us Department Of Education Onpriority Creditor's Name	Last 4 digits of account number	7. <u>16. 4. 3. /.</u>
100 Maryland Ave Sw umber Street	When was the debt incurred? 7/20/2010	
Vashington DC 20202	As of the date you file, the claim is: Check all that apply.	
ty State ZiP Code	☐ Contingent	
the incurred the debt? Chest and	☐ Unliquidated	
/ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only Debtor 2 only	T (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	2 Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Education	
l No		

Tyra Camille
First Name Middle Name

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Us Department Of Education	Last 4 digits of account number	\$ 1907
Nonpriority Creditor's Name 400 Maryland Ave Sw	When was the debt incurred? 7/20/2010	\$ <u>1907</u>
Number Street	As of the date you file, the claim is: Check all that apply.	
Washington DC 20202 City State ZIP Code		
Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
☐ Check If this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Education	
Ø No		
Us Dept. Of Education/gl Nonpriority Creditor's Name	Last 4 digits of account number 9079	\$ <u>10546</u>
	When was the debt incurred? 07.20.2010	
2401 International Number Street	The read the dest inculted?	
Madison WI 53704	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Student Loan	
Ճ №	, , , , , , , , , , , , , , , , , , ,	
Tyes		
Us Dept. Of Education/gl	Last 4 digits of account number 9079	\$ <u>17853</u>
Nonpriority Creditor's Name	When were the debt in	
2401 International	When was the debt incurred? 11.14.2008	
Number Street	As of the date you file, the claim is: Check all that apply.	
Madison WI 53704 City State ZIP Code	Contingent	
	Unliquidated	
Nho incurred the debt? Check one.	Disputed	
Debtor 1 only	·	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	ઇ Student icans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	 □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Student Loan 	
á No	- Other Opening	

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Debtor 1

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onpriority Creditor's Name Po Box 26055 umber Street Minneapolis MN 55426 ty State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? 11/30/2016 As of the date you file, the claim is: Check all that apply.	\$ <u>1814</u>
Minneapolis MN 55426 ty State ZIP Code	As of the date you file, the claim is: Check all that apply	
ty State ZIP Code	AS Of the date you the, the claim is: Check all that about	
	the state of the s	
Debtor 1 only	Contingent Unliquidated Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Collection	
No I Yes		
rection wireless/southeast	Last 4 digits of account number	\$_1814
'erizon Wireless/southeast npriority Creditor's Name	5/24/2013	
Verizon Way	When was the debt incurred?	
imber Street	As of the data you file the all-to-to-to-to-to-to-to-to-to-to-to-to-to-	
asking Ridge NJ 07920	As of the date you file, the claim is: Check all that apply.	
y State ZIP Code	Contingent	
he incurred the debt Charles	☐ Unliquidated	
ho incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Collection	
No		
Yes		
entrette till gjenskip men stette entre til men stette entrette gjensk stette til stette ette entrette til ste De sen AAN 188	Last 4 digits of account number 0-10	\$ <u>282</u>
illage Of Hoffman Estates repriority Creditor's Name		
000 Hassell Rd mber Street	When was the debt incurred? 2/24/2017	
offman Estates IL 60169	As of the date you file, the claim is: Check all that apply.	
State ZIP Code	Contingent	
	Unliquidated	
no incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	·	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset? No	Other. Specify Utility	

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Debtor 1

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Webbank/fingerhut Inpriority Creditor's Name	Last 4 digits of account number 1697	\$ <u>118</u>
onpriority Creditor's Name 6250 Ridgewood Rd	When was the debt incurred? 12/2016	
lumber Street	As of the date you file, the claim is: Check all that apply.	
Saint Cloud MN 56303 Dity State ZIP Code	-	
Who incurred the debt? Check one. Debtor 1 only	☐ Contingent☐ Unliquidated☐ Disputed☐	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans	
Check if this claim is for a community debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
No Yes	Other. Specify Collection	
erenamentatustenen hatte presiden internationatus en accessorate tenen paterioration accessorate perpenyi interner en conscientatus can en de consci Webbank/freshstart	Last 4 digits of account number <u>1697</u>	turitrinisti tritakatani, musini yeringi \$_63
onpriority Creditor's Name	12.85.2816	¥
250 Ridgewood Read umber Street	When was the debt incurred?	
Saint Cloud MN 56303	As of the date you file, the claim is: Check all that apply.	
State ZIP Code	Contingent	
the incurred the debt? Check one. Debtor 1 only	☐ Unliquidated☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset? No I Yes	Other. Specify Credit Card	
Vomens Health First	Last 4 digits of account number <u>a380</u>	\$ <u>300</u>
onpriority Creditor's Name O Box 14000 Attn # 5588y	When was the debt incurred? 11.07.16	
umber Street	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code		
·	☐ Contingent ☐ Unliquidated	
ho incurred the debt? Check one.	Disputed	
Debtor 1 only Debtor 2 only	Time of MONDPIORIES	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans Obligations origina out of a consentian account to the state of the	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	

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Debtor 1

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Womens Healthfirst Llc	Last 4 digits of account number 9329	\$ 1079
Nonpriority Creditor's Name 2250 E. Devon Ave Suite 3523 Number Street	When was the debt incurred? 11/29/2016	*
Des Plains IL 60018	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other, Specify Medical	
☑ No ☐ Yes		
中有有效的设计的一种分词形式 在最后就被引起的被称的现在分词 经有效的 一个小小小小 在我们不会的的一个人的人们的人们的人们的人们的人们的人们的人们的人们的人们	Last 4 digits of account number	ti otrocomino acciono su descreta se acciana a que
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who increased the debto of	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only Debtor 2 only	Type of MONDDIODITY	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☐ No	Other. Specify	
Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
D Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONDPIORITY upposeured alabam	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
Yes		

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Fill in this	information to ide	entify your case:			
Debtor	Гуга	Camille	Freeman		
Debtor 2	First Name	Middle Name	Last Name	The state of the s	
(Spouse If filin		Middle Name	Last Name		
United State	s Bankruptcy Court fo	or the NORTHER District	of <u>ILLINO</u> IS		
Case numbe (If known)	r				Check if this is an amended filing
Official	Form 1060	3			
Sched	ule G: Ex	 cecutory Co	ontracts an	d Unexpired Leases	12/15
1. Do you No. Yes. List sep	If more space is a ages, write your n have any executor Check this box and Fill in all of the info	needed, copy the addiname and case number ory contracts or unexp difile this form with the commation below even if the common or company with we	tional page, fill it out, (if known). ired leases? ourt with your other sch he contracts or leases; hom you have the con	together, both are equally responsible for sunumber the entries, and attach it to this page number. You have nothing else to report on this fare listed on Schedule A/B: Property (Official Fortnact or lease. Then state what each contract	orm.
example	e, rent, vehicle lea ed leases.	ase, cell phone). See th	e instructions for this fo	orm in the instruction booklet for more examples	of executory contracts and
				ALANA S	
Person	or company with	whom you have the co	ontract or lease	State what the contract or lease is	for
2.1					
Name					
Number	Street				
City		State ZIP Code		Mana-	
2.2	et gewone plante i transcribe anno an personal programpia (1800)	en er er er en	ranti comunica e i tra et e e si e con casanga casaga que casa casa como como como como como como como com	the materials of the second section of the second of the s	e describerado acuada dos dos estas estados en describerados estas estas estas en estas en estas en estas en e Estas describerados en estas en entre en estas e
Name				******	
Number	Street				
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City 2.3	det et traditioner oppositioner op	State ZIP Code			der er betrev stegere er en med ettelsfere er en er
Name				·	

Number	Street			MANAGE CONTRACTOR OF THE CONTR	
City		State ZIP Code			
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Name				area.	
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City		State ZIP Code			
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Name	· · · · · · · · · · · · · · · · · · ·			···	
Number	Street		1	_	
City		State ZIP Code		_	

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Tyra Camille Debtor 1 Freeman Case number (if know Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2.6 Name Number Street City State ZIP Code 2.7 Name Number Street City State ZIP Code 2.8 Name Number Street City State ZIP Code 2.9 Name Number Street City State ZIP Code 2.10 Name Number Street City State ZIP Code 2.11 Name Number Street City State ZIP Code 2.12 Name Number Street City State ZIP Code 2.13 Name Number Street City State ZIP Code

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	nis information to ide						
Debtor 1	Tyra	Camille	Freeman				
Debtor 2		Middle Name	Last Name				
	f filing) First Name	Middle Name	Last Name				
United St	lates Bankruptcy Court fo	r th e ORTHER District o	of ILLINOIS				
Case nun (If known)						☐ Check if amended	
Officia	al Form 106h	1					
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re filing i nd numb ase num	together, both are ed ber the entries in the aber (if known). Answ	qually responsible for a boxes on the left. Atta ver every question.	supplying correct ach the Additional	information. I Page to this p	f more space page. On the	te and accurate as possible. If two marrice is needed, copy the Additional Page, for top of any Additional Pages, write your	سم أن ال
. Doyc		rs? (If you are filing a jo	ini case, do not list	eitner spouse	as a codebt	or.)	
☐ Y							
. Withi Arizo	in the last 8 years, ha na, California, Idaho.	ave you lived in a com Louisiana, Nevada, Nev	munity property st	tate or territor	y? (Commu.	nity property states and territories include	
	lo. Go to line 3.		· Mexico, r deito (V)	CO, FEXAS, WA	siington, an	u wisconsin.)	
		former spouse, or legal	equivalent live with	you at the time	?		
	No						
L.,	Yes. In which comn	nunity state or territory d	lid you live?		Fill in the	name and current address of that person.	
	Name of your spouse, for	rmer spouse, or legal equivalen	.t				
	Number Street		A	·	····		
	0.5						
	City	State		ZIP Code			
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Debtor 1

Tyra Camille
First Name M

Additional Page to List More Codebtors

3.		C	C	"	LO		
	-	La	st	N	an	e:	_

Case number (if known)_

	Your codebtor			Colu	umn 2: The creditor to whom you owe th
		Marie Carlotte		Che	eck all schedules that apply:
Name				_ 🗆	Schedule D, line
					Schedule E/F, line
Number	Street				Schedule G, line
City		State	ZIP Code		en e
Name				. 0	Schedule D, line
·					Schedule E/F, line
Number	Street				Schedule G, line
City		State	ZIP Code	<u>.</u>	
Name				. 📮	Schedule D, line
TOTHE					Schedule E/F, line
Number	Street	THE RESERVE OF THE PERSON OF T			Schedule G, line
City		State	ZIP Code		
				П	Schedule D, line
Name					
Number	Street				Schedule E/F, line Schedule G, line
City		State	ZIP Code		
ity Vame		State	ZIP Code		Schedule D, line
lame		State	ZIP Code		Schedule E/F, line
	Street	State	ZIP Code		
lame		State	ZIP Code ZIP Code		Schedule E/F, line
lame lumber					Schedule E/F, line
lame Jumber Sity					Schedule E/F, line Schedule G, line
lame Jumber Sity					Schedule E/F, line Schedule G, line Schedule D, line
lame bity lame lumber	Street				Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line
lame Lity Lame Lumber	Street	State	ZIP Code		Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line
lame bity lame lumber	Street	State	ZIP Code		Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line
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lame Lame Lame Lame Lame Lame Lame Lame L	Street	State	ZIP Code		Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line
lame lame lumber lumber umber	Street	State State	ZIP Code		Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line
lame iumber ity ity ame umber	Street	State State	ZIP Code		Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line

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Fill	in this i	nformation to identify	/ your case:					
Debt	tor 1	Tyra	Camille	Freeman				
Debt	tor 2	First Name	Middle Name	Last Name				
(Spot	use, if filing) First Name	Middle Name	Last Name				
Unite	ed States	Bankruptcy Court for the:	NORTHER District of	LLINOIS				
Case (If kn	e number					Check	if this is:	
						 An	amended filing	
0.00		400					upplement showing pome as of the followin	ostpetition chapter 13 g date:
		orm 106l				MM	/ DD / YYYY	
Sc	hec	lule I: You	ır İncome					12/15
If you	are sep ate she	rrect information. If y parated and your spoi	ou are married and not use is not filing with yo top of any additional	t filing jointly, and y ou, do not include in	our spo	ouse is living wi	abtor 2), both are equal th you, include informa spouse. If more space i if known). Answer eve	ation about your spouse.
	l in you formatio	r employment		Debtor 1			Debtor 2 or no	ofiling spouso
		e more than one job,		tolkessis (AASSA)ster(VAIssPessinessiessOnthenstersole)singsing	yjihydiindind ei nezovojezove.	and a Care and Art Care and Art Care and Art Care and Art Care and Art Care and Art Care and Art Care and Art	DEBILO! L VI 11VI	ariante apouse
inf		eparate page with n about additional	Employment status	Employed Not employed	yed		Employed Not employe	ed
		rt-time, seasonal, or yed work.						
Oc	cupatio	n may include student aker, if it applies.	Occupation	coordinator		· · · · · · · · · · · · · · · · · · ·	AMMAN AND AND AND AND AND AND AND AND AND A	
			Employer's name	Fortitude Syst	tems			
			Employer's address	5500 Pearl St, 60018	suite 1.	30 rosemont, il		
				Number Street			Number Street	
				City	State	ZIP Code	City	State ZIP Code
			How long employed t	here? 5 months	_		ARABINA (1949)	
Part	2:	Give Details About	Monthly Income					
Est spc	timate n	nonthly income as of ess you are separated.	the date you file this fo	orm. If you have noth	ing to re	eport for any line,	write \$0 in the space. In	clude your non-filing
If ye	ou or yo ow. If yo	ur non-filing spouse ha u need more space, at	ive more than one emplo tach a separate sheet to	oyer, combine the info this form.	ormation	n for all employer	s for that person on the I	ines
					RX	For Debtor 1	For Debtor 2 or non-filing spouse)
2. Li: de	st mont eductions	nly gross wages, salas). If not paid monthly,	ary, and commissions (calculate what the monti	(before all payroll hly wage would be.	2.	\$ <u>2720</u>	\$	-
3. Es	stimate	and list monthly over	time pay.		3. H	+ \$ <u> 0</u>	+ \$	-
4. C a	alculate	gross income. Add lir	ne 2 + line 3.		4.	\$ <u>2720</u>	\$	- 1

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Case number (if known)__

Freeman

Tyra Camille
First Name Middle Name

Debtor 1

! :			For Debtor 1	For Debtor 2 or non-filing spouse	
С	opy line 4 here	→ 4.	\$ <u>2720</u>	\$	
5. Li	st all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$ 680	¢	
	5b. Mandatory contributions for retirement plans	5a. 5b.	\$ <u>080</u>	\$	
	5c. Voluntary contributions for retirement plans	5c.	\$ <u>0</u>	\$	
	id. Required repayments of retirement fund loans	5d.	\$ 0	\$	
	be. Insurance			<u> </u>	
	if. Domestic support obligations	5e.	\$ <u>850</u>	\$	
		5f.	\$ 0	<u> </u>	
	ig. Union dues	5g.	\$ <u>0</u>	\$	
5	h. Other deductions. Specify:	5h.	+\$0	+ \$	
6. A	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ <u>1530</u>	\$	
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>1190</u>		
8. L i	ist all other income regularly received:				
8	a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u>0</u>	<u> </u>	
8	Bb. Interest and dividends	8b.	\$ 0	\$	
8	c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent	Y		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <u>0</u>	\$	
	d. Unemployment compensation	8d.	\$ <u>0</u>	\$	
8	e. Social Security	8e.	\$ <u>0</u>	\$	
8	If. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ce			
	Specify:	8f.	\$	\$	
8	g. Pension or retirement income	8g.	\$ <u>0</u>	\$	
8	h. Other monthly income. Specify:	8h.	+\$_0	+\$	
9. A	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_0	\$	
	iculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <u>1190</u>	+ \$=	= \$ <u>1190</u>
1. S t	ate all other regular contributions to the expenses that you list in Sched	iule J.			
Ind frie	clude contributions from an unmarried partner, members of your household, yends or relatives.	our de	ependents, your roo	ommates, and other	
Do	o not include any amounts already included in lines 2-10 or amounts that are r	not av	ailable to pay expe	nses listed in Schedule J.	
Sp	pecify:			11. +	\$ 0
2. A c Wi	ld the amount in the last column of line 10 to the amount in line 11. The rite that amount on the Summary of Your Assets and Liabilities and Certain St	result tatistic	is the combined meal Information, if it	onthly income. applies 12.	\$ <u>1190</u>
13. D	o you expect an increase or decrease within the year after you file this fo	orm?			Combined monthly income
	l No.				
Z	l Yes. Explain: hopefully a pay raise				
		-			

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Fill in	n this information to identify	/ your case:				
Debto		Camille Freema				
Debto	First Name	Middle Name Last N		eck if this is:		
(Spous	se, if filing) First Name	Middle Name Last No		An amended f	•	petition chapter 13
United	d States Bankruptcy Court for the:	NORTHER District of ILLINOI		expenses as o		
Case (If kno	number		,	MM / DD / YYY)	(
	cial Form 106J	-				
Sci	hedule J: Yo	ur Expenses				12/15
inform	ation. If more space is need wn). Answer every question		are filing together, both are e to form. On the top of any add	qually respons itional pages, v	ible for supply write your nam	ing correct e and case number
	is a joint case?					
	No. Go to line 2.					
	es. Does Debtor 2 live in a	separate household?				
	No Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses	s for Separate Household of De	ebtor 2.		
2. Do y	ou have dependents?	□ No				
Do n Debt	ot list Debtor 1 and or 2.	Yes. Fill out this information each dependent		o to	Dependent's age	Does dependent live with you?
Do n	ot state the dependents'		Daughter		12	U No ☑ Yes
			Son		10	□ No
			***************************************			Yes
						No No
						Yes
						Vo Ves
						☑ No
						Yes
expe	our expenses include nses of people other than self and your dependents?	☑ No □ Yes				
Part 2:	Estimata Yaur Onnai	ing Monthly Expenses				
			Ann an maine Altin Commission		01	
expens	es as of a date after the bar	bankruptcy filing date unless y kruptcy is filed. If this is a supp	olemental Schedule J, check	the box at the	a Chapter 13 ca top of the form	ase to report and fill in the
	ble date.					
		-cash government assistance i			Vour avnar	neo e
		I it on Schedule I: Your Income expenses for your residence. Inc	•	ا د	Your expen	warenesses
any	rent for the ground or lot.	Apenses for your residence. Inc	cidde inst mortgage payments	and 4.	\$_900	TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT
	ot included in line 4:				. 0	
4a.	Real estate taxes	entorio incurso		4a.	\$ <u>0</u> \$0	
4b. 4c.	Property, homeowner's, or n			4b.	\$ <u>0</u>	
4d.	Home maintenance, repair, and Homeowner's association or			4c.	\$_ 0	A.A.C.C.A.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C
÷u.	Compound a association of	condominate dues		4d.	\$	

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			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$_0
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	_{\$} 250
	6b. Water, sewer, garbage collection	6b.	§ 85
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 105
	6d. Other. Specify:	6d.	\$ 0
7.		7.	\$ 300
8.	Childcare and children's education costs	8.	\$_0
9.	Clothing, laundry, and dry cleaning	9.	s 100
10.	Personal care products and services	10.	ş <u>50</u>
11.	Medical and dental expenses	11.	\$ 45
12.	Transportation. Include gas, maintenance, bus or train fare.		40
	Do not include car payments.	12.	\$ 00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ <u>0</u>
14.	Charitable contributions and religious donations	14.	\$ <u>0</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$ <u>0</u>
	15b. Health insurance	15b.	\$_0
	15c. Vehicle insurance	15c.	\$ 0
	15d. Other insurance. Specify:	15d.	\$ 0
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$ <u> </u>
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	s 0
	17b. Car payments for Vehicle 2	17b.	\$_0
	17c. Other. Specify:	17c.	\$ 0
	17d. Other. Specify:	17d.	\$ <u>0</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$ <u>0</u>
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$ <u> </u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	•
	20a. Mortgages on other property	20a.	\$ <u>0</u>
	20b. Real estate taxes	20b.	\$ <u>0</u>
	20c. Property, homeowner's, or renter's insurance	20c.	\$ <u>0</u>
	20d. Maintenance, repair, and upkeep expenses	20d.	\$ <u>0</u>
	20e. Homeowner's association or condominium dues	20e.	\$_0

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Debtor 1	Tyra Cam	ille Middle Name	Freeman Last Name		Case number (if known)	
21. Other.	Specify:				21.	+\$_0
2. Calcula	ite your mont	nly expenses.				
22a. Ad	d lines 4 throu	gh 21.			22a.	_{\$1895}
22b. Co	py line 22 (mo	nthly expenses	for Debtor 2), if any, from Off	ficial Form 106J-2	22b.	\$
22c. Add	d line 22a and	22b. The resul	t is your monthly expenses.		22 c.	\$
3. Calculate	e your month	y net income.				
23a. Co	ppy line 12 (you	ur combined m	onthly income) from Schedule	<i>∙ 1.</i>	23a.	\$ <u>1190</u>
23b. Co	py your month	ly expenses fro	om line 22c above.		23b.	- \$_1895
23c. Su	btract your mo	nthly expense:	s from your monthly income.			
Th	e result is you	monthly net ir	acome.		23 c.	\$ -705
4. Do you e	expect an incr	ease or decre	ase in your expenses withir	ո the year after you fi	le this form?	
For exam	nple, do you ex	pect to finish p	aying for your car loan within ease because of a modification	the year or do you exp	pect your	
₩ No.						
Yes.	Explain he	·e:				***************************************
	•					
	* 					

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	Case II	20000 0001	Document	Page 66 of 92	.11 Description
Fill in this i	nformation to id	lentify your case:			
Debtor 1	Tyra First Name	Camille Middle Name	Freeman Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	£ast Name	Michigan Sayahar Sayah	
United States	Bankruptcy Court	for the: NORTHER Distric	et of ILLINOIS		
Case number (If known)			Markedon extraordor marinar		_
	····				Check if this is an amended filing
					Ť
Officia	al Form 10	06Dec			
Decl	aration	n About an	Individua	l Debtor's Sched	ules 12/15
If two mar	ried people are	filing together, both are	equally responsible f	or supplying correct information.	
obtaining	money or prope	henever you file bankru erty by fraud in connect §§ 152, 1341, 1519, and :	ion with a bankruptcy	ended schedules. Making a false stater case can result in fines up to \$250,000	ment, concealing property, or l, or imprisonment for up to 20
	Sign Below				
Did yo	u pay or agree t	to pay someone who is	NOT an attorney to he	lp you fill out bankruptcy forms?	
□ No					
β ∠ Ye:	 Name of persor 	n		Attach Bankruptcy Petition Preparer's Signature (Official Form 119).	Notice, Declaration, and
				J	

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 1

Signature of Debtor 2

Date MM / DD / YYYY

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Debtor 1 Tyra Cami First Name Middle N Debtor 2 Spouse, if filing) First Name Middle N Onited States Bankruptcy Court for the: NORTHI				
Debtor 2 Spouse, if filing) First Name Middle N				
	lame Last Name			
Inited States Bankrintov Court for the INUK F FIL				
	ER District of ILLINOIS			
Case number If known)	**************************************		☐ Check if t	nis is ar
			amended	filing
fficial Form 107				
tatement of Financial	Affairs for Indiv	iduals Filing for l	Bankruptcy	04/1
as complete and accurate as possible. If ormation. If more space is needed, attack mber (if known). Answer every question. art 1: Give Details About Your Ma	h a separate sheet to this fo	rm. On the top of any additional	pages, write your name and case	•
What is your current marital status?				
pathinaneau				
Married				
During the last 3 years, have you lived a	nywhere other than where y	ou live now?		
During the last 3 years, have you lived a	•	e where you live now.	Dates De lived the	
During the last 3 years, have you lived a Ro Yes. List all of the places you lived in the	he last 3 years. Do not include Dates Debtor 1	e where you live now.	lived the	e
During the last 3 years, have you lived a Ro Yes. List all of the places you lived in the	he last 3 years. Do not include Dates Debtor 1 lived there	e where you live now. Debtor 2:	lived the	e s Debtor 1
During the last 3 years, have you lived a No Yes. List all of the places you lived in the Debtor 1:	he last 3 years. Do not include Dates Debtor 1	e where you live now. Debtor 2:	lived then Same at	e s Debtor 1
During the last 3 years, have you lived a No Yes. List all of the places you lived in the Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	lived the	e s Debtor 1
During the last 3 years, have you lived a No No Yes. List all of the places you lived in the Debtor 1: 2150 Sutherland Pl Number Street Hoffman Estates	Dates Debtor 1 lived there From 9/2016 To 6/2017	Debtor 2: Same as Debtor 1 Number Street	lived then Same at From _ To _	e s Debtor 1
During the last 3 years, have you lived a No Yes. List all of the places you lived in the places you lived in the places. Debtor 1: 2150 Sutherland Pl Number Street	Dates Debtor 1 lived there From 9/2016 To 6/2017	e where you live now. Debtor 2: Same as Debtor 1 Number Street City St	Same at ZIP Code	e S Debtor 1
During the last 3 years, have you lived a No No Yes. List all of the places you lived in the Debtor 1: 2150 Sutherland Pl Number Street Hoffman Estates City State ZIP	Dates Debtor 1 lived there From 9/2016 To 6/2017	Debtor 2: Same as Debtor 1 Number Street	lived then Same at From _ To _	e S Debtor 1
During the last 3 years, have you lived a No Yes. List all of the places you lived in the places you lived in the places. 2150 Sutherland Please Street Hoffman Estates City State Zip 220 Cameron Ave	Dates Debtor 1 lived there From 9/2016 To 6/2017	e where you live now. Debtor 2: Same as Debtor 1 Number Street City St	Same at ZIP Code	s Debtor 1
During the last 3 years, have you lived a No No Yes. List all of the places you lived in the Debtor 1: 2150 Sutherland Pl Number Street Hoffman Estates City State ZIP	Dates Debtor 1 lived there From 9/2016 To 6/2017 60169 Code	e where you live now. Debtor 2: Same as Debtor 1 Number Street City St	From _ To _ ate ZIP Code	s Debtor 1
During the last 3 years, have you lived a No Yes. List all of the places you lived in the places you lived in the places. 2150 Sutherland Please Street Hoffman Estates City State Zip 220 Cameron Ave	Dates Debtor 1 lived there From 9/2016 To 6/2017 60169 Code From 1/2015	e where you live now. Debtor 2: Same as Debtor 1 Number Street City St	Fromate ZIP Code	s Debtor 1

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btor 1		eman	Case ni	umber (if known)	
	First Name Middle Name Le	st Name			
Fill in the	the have any income from employment total amount of income you receive are filing a joint case and you have income.	ed from all jobs and all busi	nesses, including part-ti	me activities.	ndar years?
1 (Second		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of current year until e date you filed for bankruptcy:	bonuses, tips	\$_15000	Wages, commissions, bonuses, tips	\$_0
		Operating a business		Operating a business	
	or last calendar year:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$0
(Ja	anuary 1 to December 31, Yr 2016 YYYY	_)		Operating a business	
	or the calendar year before that:	Wages, commissions, bonuses, tips	(500	☐ Wages, commissions,	
Fo		Donuses, ups	¢ 6500	bonuses, tips	\$ 0
(Ja Did you Include unemple	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filing	ncome is taxable. Examples ments; pensions; rental inco	of other income are alin ome; interest; dividends;	money collected from laws	Security, uits; royalties; and
Did you include unemple gamblin List eac	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filing the source and the gross income from	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have	of other income are aling ome; interest; dividends; income that you receive	nony; child support; Social S money collected from laws ed together, list it only once	Security, uits; royalties; and
Did you include unemple gamblin	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filing	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have	of other income are aling ome; interest; dividends; income that you receive	nony; child support; Social S money collected from laws ed together, list it only once	Security, uits; royalties; and
Did you include unempk gamblin List eac	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filing the source and the gross income from	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do	of other income are aling ome; interest; dividends; income that you receive	nony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4.	Security, uits; royalties; and under Debtor 1. Gross income from each source
Did you include unemple gamblin List eac No Yes.	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filling the source and the gross income from s. Fill in the details.	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below.	of other income are alinome; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions)
Did you Include unemple gamblin List eac No Yes.	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filling the source and the gross income from s. Fill in the details.	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. Unemployment Benefit	of other income are alinome; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 3600 \$	nony; child support; Social S money collected from lawsi ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
Did you Include unemple gamblin List eac No Yes.	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filling the source and the gross income from s. Fill in the details.	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. Unemployment Benefit	of other income are alinome; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 3600 \$	nony; child support; Social S money collected from lawsi ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
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Did you include unemplo gamblin List eac No Yes.	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filling the source and the gross income from a Fill in the details.	this year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. Unemployment Benefit	of other income are alinome; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 3600 \$	nony; child support; Social S money collected from lawsi ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$ 0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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Did you Include unemple gamblin List eac No Yes.	u receive any other income during income regardless of whether that in loyment, and other public benefit paying and lottery winnings. If you are filling the source and the gross income from a Fill in the details.	this year or the two previous come is taxable. Examples ments; pensions; rental income g a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. Unemployment Benefit	of other income are alinome; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 3600 \$	nony; child support; Social S money collected from lawsi ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$ 0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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Tyra Camille Debtor 1 Freeman Case number (if known) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ☐ Mortgage Creditor's Name Car Car Credit card Number Street Loan repayment ☐ Suppliers or vendors Other_ City State ZIP Code ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other City State ZIP Code Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other City State ZIP Code

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or 1	Tyra Camille First Name Middle Name	Freeman Last Name		-	Case number (if known))
Insidea corpor agent, such a	rations of which you are an o including one for a busines as child support and alimony	y general partners; i officer, director, pers s you operate as a s	relatives of any son in control, o	general partners; property of 20% or	partnerships of which more of their voting	who was an insider? The you are a general partner; I securities; and any managing Ir domestic support obligations,
No						
∟i Ye	s. List all payments to an in	sider.	Dates of payment	Total amount	Amount you still owe	Reason for this payment
				_	_	or the commission of the American Section of the Se
Īr	nsider's Name			\$	\$	
N	lumber Street	4,4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
_						
Ĉ	ity	State ZIP Code	-			
Īn	nsider's Name			\$	\$	
•						
N	lumber Street					
	44,4					
c	ity	State ZIP Code				
an insi Include	ider? e payments on debts guarar	nteed or cosigned by		ayments or trans Total amount paid	fer any property of Amount you still owe	Reason for this payment include creditor's name
In	sider's Name		Milled Mark Schools and a contract an	\$	\$	
Ni	umber Street		***************************************			
Ci	ity :	State ZIP Code				
						and the second of the second o
In	sider's Name			\$	\$	
Ni						
	umber Street					
	umber Street					

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1	Tyra Camille	Freeman		Case number (if known)	
	First Name Middle Name	Last Name				
e cosos	ı					
1 4:	Identify Legal Action	s, Repossessio	ns, and Foreclosures			
/ithin	1 1 year before you filed fo	or bankruptcy, we	re you a party in any lawsu	it, court action, or a	administrative proce	eding?
stall	l such matters, including per ontract disputes.	rsonal injury cases	, small claims actions, divorc	es, collection suits, p	paternity actions, supp	ort or custody modifica

No						
re	s. Fill in the details.					4.4
		Natu	re of the case	Court or agency		Status of the cas
_						П.,
C	ase title			Court Name		Pending
						On appeal
				Number Street		Concluded
C	ase number			City	Plata ZID Code	····
		:		Oity	State ZIP Code	
		:				—
Ca	ase title			Court Name		— Pending
		:				On appeal
				Number Street		Concluded
Ca	ase number					
				City	State ZIP Code	
	s. Fill in the information belo		Describe the property		Date	Value of the propert
						value of the propert
						¢
	Creditor's Name		ALLEMAN.			Φ
	The state of the s					
	Number Street		Explain what happened			
			Property was repos			
			Property was forecle			
	City	State ZIP Code	☐ Property was garnis☐ Property was attach		ı	
	· · · · · · · · · · · · · · · · · · ·	Otate 21 Code		ieu, seizeu, oi ievieu		
			Describe the property		Date	Value of the proper
	Creditor's Name					\$
	Creditor's Name				1 1	
	Number Street					
	, tamber of our		Explain what happened			
	A-#4044444444444444444444444444444444444		Property was repose	sessed.		
			Property was forecle			
	City	State ZIP Code	Property was garnis			
	,	J 25 0005	Property was attach	ed, seized, or levied		

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	Tyra Camille First Name Middle Nam	mo (not)	man Name		Ca	ase number (if kno	own)		
	The trained that the trained that	to Cost I	ivanie						
thin	90 days before you fi	led for bankrup	ptcy, did any credi	tor, includin	g a bank or	financial inst	itution, se	t off any	amounts from you
cour ⊹No	nts or refuse to make	a payment bec	ause you owed a	debt?					
	s. Fill in the details.								
res	s. Fili in the details.								
			Describe the action	n the credito	r took			action taken	Amount
Crea	Jitor's Name		:			***************************************			
Numi	iber Street		-						\$
HUHH	ive Street		•						
************			-						
			* ***						
City	S	itate ZIP Code	Last 4 digits of a	count numb	er: XXXX		al-Veraleiter		
hin	1 year before you file	d for bankrupte	cy, was any of you	r property ir	the posses	ssion of an as	sianee fo	r the ben	efit of
dito	rs, a court-appointed	receiver, a cus	stodian, or another	official?	•		J		
No									
Yes	5								
>:	List Certain Gifts a	and Contribut	tions						
_									
No	2 years before you file . Fill in the details for e		tcy, did you give a	ny gifts with	a total valu	e of more tha	n \$600 pe	r person	?
No Yes.		ach gift.	tcy, did you give an	ny gifts with	a total valu	e of more tha		s you gave	
No Yes.	:. Fill in the details for e	ach gift.		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	ts. Fill in the details for e	each gift. nore than \$600		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	:. Fill in the details for e	each gift. nore than \$600		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	ts. Fill in the details for e	each gift. nore than \$600		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	ts. Fill in the details for e	each gift. nore than \$600		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	ts. Fill in the details for e	each gift. nore than \$600		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	i. Fill in the details for e fts with a total value of m r person on to Whom You Gave the Gift	each gift.		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	i. Fill in the details for e fts with a total value of m r person on to Whom You Gave the Gift	each gift. nore than \$600		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	i. Fill in the details for e fts with a total value of m r person on to Whom You Gave the Gift	each gift.		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	i. Fill in the details for e fts with a total value of m r person on to Whom You Gave the Gift per Street	each gift.		ny gifts with	a total valu	e of more tha	Date	s you gave	
No Yes. Giff per	i. Fill in the details for e fts with a total value of m r person on to Whom You Gave the Gift per Street	each gift. nore than \$600 t		ny gifts with	a total valu	e of more tha	Date the g	s you gave	• Value \$ \$
No Yes. Giff per	is. Fill in the details for exists with a total value of mr r person on to Whom You Gave the Gift or Street Street on's relationship to you	each gift. nore than \$600 t	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per perso	is. Fill in the details for exists with a total value of mr person on to Whom You Gave the Gift on's relationship to you s with a total value of moperson	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per perso	is. Fill in the details for exists with a total value of mr r person on to Whom You Gave the Gift or Street Street on's relationship to you	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per perso	is. Fill in the details for exists with a total value of mr person on to Whom You Gave the Gift on's relationship to you s with a total value of moperson	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per perso	is. Fill in the details for exists with a total value of mr person on to Whom You Gave the Gift on's relationship to you s with a total value of moperson	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per Person	is. Fill in the details for each street street. Street st	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per perso	is. Fill in the details for each street street. Street st	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$
No Yes. Giffs per Person	is. Fill in the details for each street street. Street st	each gift. nore than \$600 t ate ZIP Code	Describe the gifts	ny gifts with	a total valu	e of more tha	Date:	s you gave	• Value \$ \$

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tor 1	Tyra Camille First Name Middle Name	Freeman Lest Name	Case number (if known)	
Withi	in 2 years before you filed for	or bankruptcy,	did you give any gifts or contributions with a total value of more the	nan \$600 to any charity?
ZΝ	lo			
☐ Y	es. Fill in the details for each	gift or contributi	ion.	
	Gifts or contributions to chariti			AND ALL CONTRACT
	that total more than \$600	les De	scribe what you contributed Date you contribute	Value
C	harity's Name			<u> </u>
_				_ \$
Ni	umber Street			
Ci	ty State ZIP Code			
6:	List Certain Losses			
	es. Fill in the details. Describe the property you lost a	and De	escribe any insurance coverage for the loss Date of you	r Value of property
,	now the loss occurred		clude the amount that insurance has paid. List pending insurance aims on line 33 of Schedule A/B: Property.	lost
1				•
:				<u> </u>
	arms to many the factor of the services			
7:	List Certain Payments	or Transfers		
/ithi	n 1 year before you filed for	bankruptcy, d	id you or anyone else acting on your behalf pay or transfer any pro	perty to anyone
ou c	onsulted about seeking bar	nkruptcy or pre	paring a bankruptcy petition?	
		petition preparer	rs, or credit counseling agencies for services required in your bankrupto	y.
No				
J Ye	es. Fill in the details.			
		De	scription and value of any property transferred Date payme	nt or Amount of paymen
Ē	Person Who Was Paid		transfer was	3
r	VISOR WITH WAS FAIG	**	maue	
ñ	lumber Street			\$
				. ¥
				\$
_				
C	ity State 2	(IP Code		
=				
E	mail or website address	:		
P	erson Who Made the Payment, if Not Y	You		

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First Name Middle Name Last	it Name	Case number (if known)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	Trianic			÷
	Description and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			
Number Street	~ .			\$
				\$
City State ZIP Code	· · ·			
Email or website address				
Person Who Made the Payment, if Not You				
No Yes. Fill in the details.				
	Description and value of any property to	ransferred	transfer was	Amount of pay
Person Who Was Paid			made	
Number Street	-		- Annual Control of Special Cont	\$
	. !		Market and the second s	\$
City State ZIP Code				
hin 2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise t	ranster any property to	o anvone, other thai	n property
thin 2 years before you filed for bankrup insferred in the ordinary course of your lude both outright transfers and transfers in not include gifts and transfers that you had No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting or		ortgage on your prop	
nsferred in the ordinary course of your is ude both outright transfers and transfers not include gifts and transfers that you have No	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or m	ortgage on your prop	erty). Date transfe
nsferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or m	ortgage on your prop	erty). Date transfe
nsferred in the ordinary course of your lude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or m	ortgage on your prop	erty). Date transfe
nsferred in the ordinary course of your lude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street	business or financial affairs? made as security (such as the granting of very already listed on this statement. Description and value of property transferred	f a security interest or m	ortgage on your prop	erty). Date transfe
nsferred in the ordinary course of your lude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting of very already listed on this statement. Description and value of property transferred	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe
nsferred in the ordinary course of your lude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? made as security (such as the granting of very already listed on this statement. Description and value of property transferred	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe
nsferred in the ordinary course of your lude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer	business or financial affairs? made as security (such as the granting of very already listed on this statement. Description and value of property transferred	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe

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fithin 10 years before you file				
re a heneficiary? (These are	ed for bankruptcy, did you transfer any proper often called asset-protection devices.)	rty to a self-settled tru	st or similar device of v	which you
	Siteri called asset-protection devices.)			
No Yes. Fill in the details.				
Yes. Fill in the details.				
	Description and value of the prope	erty transferred		Date transfer
		######################################		was made
Name of trust				
				and the state of t
and the contract of the contra		and the second s		
8: List Certain Financia	al Accounts, Instruments, Safe Deposit	Boxes, and Storag	e Units	
	for bankruptcy, were any financial accounts			h64
osed, sold, moved, or transf		or instruments neid in	your name, or for your	репетіт,
•	oney market, or other financial accounts; cert	tificates of deposit; sh	ares in banks, credit ur	nions.
okerage houses, pension fu	inds, cooperatives, associations, and other fi	nancial institutions.	,	•
No				
Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or	Date account was	Last balance befor
	ें इ	instrument	closed, sold, moved, or transferred	closing or transfer
Name of Financial Institution	XXXX	☐ Checking		•
	^^^^	-		\$
Number Street		Savings		
		Money market		
City State	ZIP Code	☐ Brokerage		
City State	ZIP Code	Other		
		Checking		\$
	XXXX			
Name of Financial Institution	XXXX			
	XXXX	☐ Savings		
Name of Financial Institution Number Street	XXXX	Savings Money market		
	XXXX	☐ Savings		

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otor 1	Tyra Camille		man Nams	Са	se number (if known)	Westerland and the second and the se
		and reality (see)	. Tallio			
		y in a storage unit	or place other than your	home within 1 yea	r before you filed for bank	ruptcy?
ZZ No						
∐ Ye	es. Fill in the details	5.	Who else has or had acc	to #0	Describe the contents	and Angles and Alberta
			Will else lias of flad acc	ess to it :	Describe the contents	Do you sti have it?
						□ No
i	Name of Storage Facility		Name		•	Yes
:				····	-	:
'	Number Street		Number Street			
-		nt-nt-nt-nt-nt-nt-nt-nt-nt-nt-nt-nt-nt-n	City State ZIP Code		•	
ē	City	State ZIP Code				
art 9:	identify Pro	perty You Hold	or Control for Someo	ne Else		
. Do yo	ou hold or control a	any property that s	omeone else owns? Incl	ude any property y	ou borrowed from, are st	oring for,
or ho	old in trust for some				·	•
Z N	0					
U Y	es. Fill in the detail	ls.				
			Where is the property?		Describe the property	Value
						•
						\$
7	Owner's Name					
			Number Street		-	
	Owner's Name Number Street		Number Street			
i	Number Street		Number Street	State ZIP Code	-	
i		State ZIP Code		State ZIP Code	-	
Î	Number Street			State ZIP Code	-	
i art 10	Number Street City Give Details	About Environm	City nental information	State ZIP Code	-	
art 10	Number Street City Give Details ourpose of Part 10,	About Environment	City mental Information nitions apply:		- nollution contamination	ralesces of
art 10 or the p Envir hazar	City Give Details ourpose of Part 10, ronmental law mean	the following defines any federal, statestances, wastes, or	nental information nitions apply: te, or local statute or reg r material into the air, lar	ulation concerning	pollution, contamination	
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or the period of	Give Details City Give Details conmental law mean redous or toxic subsiding statutes or regeneral in the commental in the	the following defines any federal, states tances, wastes, or gulations controlling, facility, or proper, operate, or utilize	nental information nitions apply: te, or local statute or reg r material into the air, lar ng the cleanup of these s rty as defined under any it, including disposal si	ulation concerning d, soil, surface wa substances, wastes environmental law ies.	ter, groundwater, or othe s, or material. , whether you now own, c	r medium, perate, or
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ert 10 or the p Envir hazar includ Site n utilize Hazai subst eport a	Give Details City Give Details Commental law mean rous or toxic subsiding statutes or regeneans any location in the it or used to own, redous material means and commental unders. Fill in the details are of site	the following definences, wastes, or gulations controlling, facility, or proper operate, or utilize ans anything an enmaterial, pollutant, s, and proceedings and notified you that	mental information nitions apply: te, or local statute or reg r material into the air, lar ng the cleanup of these s rty as defined under any it, including disposal si vironmental law defines contaminant, or similar t that you know about, re at you may be liable or pe	ulation concerning id, soil, surface wa substances, waster environmental law ies. as a hazardous wa erm. gardless of when to	ter, groundwater, or othe s, or material. , whether you now own, o este, hazardous substanc hey occurred. der or in violation of an er	r medium, perate, or e, toxic evironmental law?
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e you notified any governmental	l unit of any release of hazardous mater	ial?	
No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		!
	City State ZIP Code	_	
City State ZIP	Code		
	al or administrative proceeding under a	ny environmental law? Include settlements	and orders.
No -			
Yes. Fill in the details.		and the second second	Status of the
	Court or agency	Nature of the case	case
Case title			☐ Pending
	Court Name		On appea
	Number Street	NAMES OF THE PARTY	Conclude
	Number Street	nament en-	Conclude
	City State ZIP Connections to An	y Business	
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Debtor 1	Tyra Camille	Freeman	Case number (if known)
	First Name Middle Name	Last Name	
	a a de a casa da de		
		Describe	the nature of the business Employer Identification number
			Do not include Social Security number or ITIN.
	Business Name		Eial.
			EIN:
	Number Street		accountant or bookkeeper Dates business existed
		:	de la final de la composition de la composition de la composition de la composition de la composition de la co
	City State	ZIP Code	From To
	•	!	
***************************************	engengen var stematingen og værste formælse vikk og forskrings som at hande som eller som vikk som eller som e	ب بي خورسور دي ووريس دين سيدوسود هو هيرست ديده دو ديود درست	
28 Wit	hin 2 years hefore you filed f	or hankruntey did you	give a financial statement to anyone about your business? Include all financial
	titutions, creditors, or other p		Tyre a mancial statement to anyone about your business? microce all mancial
V			
ابسا	Yes. Fill in the details below.		
		Date issu	ed High F
	Name	MM / DD / Y	YYY
	Number Street	***************************************	
	City State	ZIP Code	
Part 1	2: Sign Below		
1.		A	
an	lave read the answers on this Iswers are true and correct. I	Statement of Financi understand that maki	al Affairs and any attachments, and I declare under penalty of perjury that the ng a false statement, concealing property, or obtaining money or property by fraud
in	connection with a bankrupto	y case can result in fi	nes up to \$250,000, or imprisonment for up to 20 years, or both.
18	U.S.C. §§ 152, 1341, 1519, ar	id 3571.	
7			
-			×
and the second		The state of the s	
	Signature of Debtor 1		Signature of Debtor 2
	Date 8 / 30 / 2017		•
			Date
Die	d you attach additional pages	s to Your Statement of	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Ø	No		
	Yes		
			Manus de la la companya de la companya de la companya de la companya de la companya de la companya de la compa
		neone wno is not an a	ittorney to help you fill out bankruptcy forms?
	No		
ĮZ)	Yes. Name of person	***************************************	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
			Decidianon, and Signature (Official Form 119).

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Fill in this in	Fill in this information to identify your case:						
Debtor 1	Tyra	Camille	Freeman				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court (for the: NORTHER District	of ILLINOIS				
Case number							
(If known)							

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Santander Consumer Usa	Surrender the property.	√ No
	Retain the property and redeem it.	res
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	<u></u>
	Retain the property and [explain]:	
2008 Ford Escort (repo)		
Creditor's Santander Consumer Usa	Surrender the property,	No
	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
and and an arrangement of the second of the	Retain the property and [explain]:	
2009 Hyundai Sonata		
Creditor's Santander Consumer Usa	Surrender the property.	✓No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	· · · · · · · · · · · · · · · · · · ·
_	Retain the property and [explain]:	
2008 Ford Escort (repo)		
Creditor's	Surrender the property.	No
···	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	neammation Agreement.	

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Tyra Camille

Freeman

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Debtor 1

Middle Name

Lest Name

Case number (If known)_

Part	2:	List You	Unexpired	Personal	Property	Leases
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For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

		□ No
escription of leased operty:		Yes
essor's name:		No
escription of leased roperty:		□Yes
essor's name:		No
escription of leased roperty:		Yes
essor's name:		No
escription of leased roperty:		Yes
essor's name:		I No
escription of leased roperty:		Yes
essor's name:		[□ No
escription of leased operty:		<u>r⊡</u> Yes
essor's name:		□No
escription of leased roperty:		Yes
antiferentiale e e e e e e e e e e e e e e e e e e		
3: Sign Below		
der penalty of perjury, I decla sonal property that is subjec	are that I have indicated my intention about any property of my est ct to an unexpired lease.	tate that secures a debt and any
	×	
At A A	• • • • • • • • • • • • • • • • • • •	

United States Bankruptcy Court NORTHERN District Of ILLINOIS

IN RE.	Freeman, Tyra	
	Debtor(s).	Case No.

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of my/our knowledge and that it corresponds to the creditors listed in my/our schedules.

Date: 8 30 2017

Debtor

Joint Debtor

Acceptance Now 5501 Headquarters Dr Plano TX 75024

Acceptance Now 905 Perimeter Dr Schaumburg IL 60173

Acceptance Now 5501 Headquarters Drive Plano TX 75024

Account Resolution Service Po Box 459079 Sunrise FL 33345

Account Resolution Service 1643 North Harrison Pkwy Building H Suite 100 Sunrise FL 33323

Account Resolution Service 1643 North Harrison Pkwy Building H Suite 100 Sunrise FL 33323

Account Resolution Service 1643 North Harrison Pkwy Building H Suite 100 Sunrise FL 33323

Allied Interstate Llc 7525 W. Campus Rd New Albany OH 43054 Ars Po Box 459079 Sunrise FL 33345

Ars
Pop Box 459079
Sunrise FL 33345

Ars
Po Box 459079
Sunrise FL 33345

Baxter Credit Union 400 North Lakeview Parkway Vernon Hills IL 60061

C. H. A.d.
655 Deerfield Rd.
Deerfield IL 60015

C.h.a.d 655 Deerfield Rd Suite 100-300 Deerfield IL 60015

Caine & Weiner 15025 Oxnard Street Suite 100 Van Nuys CA 91411

Caine & Weiner Company Inc 1699 E. Woodfield Rd. Ste 360 Schaumburg IL 60173 Cmi 4200 International Parkway Carrollton TX 75007

Comcast Po Box 64378 Saint Paul MN 55164

Credit Management 2121 Noblestown Rd Pittsburg PA 15205

Credit Protection 13355 Noel Rd 21st Flr Dallas TX 75240

Creditors Discount & Aud 415 E. Main Street Streator IL 61364

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Department Of Education 61 Forsyth St Sw Ste 19t40 Atlanta GA 30303 Department Of Education 61 Forsyth St Sw Ste 19t40 Atlanta GA 30303

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Direct Loan Svs Systems P.o. Box 5609 Greenville TX 75403

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Diversified Services Inc 2250 E Devon Ave Des Plaines IL 60018

Dr. Clifford Swanson 2215 W. Schaumburg Rd Schaumburg IL 60194 Enterprise Rent-a-car 2031 N. State St. Belvidere IL 61008

Federated Collection Bureau 3250 Peachtree Corners Circle Suite F Norcross GA 30092

Great Lake Higher Education Po Box 7860 Madison WI 53707

Great Lakes Higer Education Po Box 7860 Madison WI 53707

I.c. Systems Inc. 444 Highway 96 E Saint Paul MN 55127

Ic Systems Collections 444 Hwy 96 E Saint Paul MN 55127

Imataz Carbide 2315 West Devon Ave Chicago IL 60659

Imtiaz Carbide 2315 W. Devonave #2 Chicago IL 60659 Miramed Revenue Group 360 E 22nd St Lombard IL 60148

Miramed Revenue Group P.o. Box 77000 Dept. 77304 Detroit MI 48277

Quest Diagnostics Po Box 740397 Cincinnati OH 45274-0397

Radiological Consultants 415 E Main Street Streator IL 61634

Radiological Consultants 415 E Main Street Streator IL 61364

Radiological Consultants 415 E. Main Street Streator IL 61364

Rent Recover Llc 220 Gerry Dr Wood Dale IL 60191

Rent Recover Of Better Noi 220 Gerry Drive Wooddalle IL 60191 Santander Consumer Usa 8585 North Stemmons Freeway Suite 1100-n Dallas TX 75247

Santander Consumer Usa 5201 Rufe Snow Dr North Richland Hills TX 76180

Santander Consumer Usa P.o. Box 961245 Fort Worth TX 76161

Southwest Credit 4120 International Pkwy Suite 1100 Carrollton TX 75007

Southwest Credit Systems 2629 Dickerson Pkwy Carrollton TX 75007

Sprint 6200 Sprint Parkway Overland Park KS 66251

Sw Credit Systems 4120 International Pkwy Ste 1100 Carrollton TX 75007

Syncb Lord & Taylor Po Box 965015 Orlando FL 32896 Syncb/lord & Taylor P.o. Box 965015 Orlando FL 32896

The Cbe Group Inc - Former 131 Tower Park Drive Waterloo ID 50704

United Healthcare Insurance Co P.o. Box 740800 Atlanta GA 30374

Us Department Of Edu Afsa 1101 17th Street, N.w. Suite 408 Washington DC 20036

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Us Dept. Of Education/gl 2401 International Madison WI 53704 Us Dept. Of Education/gl 2401 International Madison WI 53704

Verizon Wireless Po Box 26055 Minneapolis MN 55426

Verizon Wireless/southeast 1 Verizon Way Basking Ridge NJ 07920

Village Of Hoffman Estates 1900 Hassell Rd Hoffman Estates IL 60169

Webbank/fingerhut 6250 Ridgewood Rd Saint Cloud MN 56303

Webbank/freshstart 6250 Ridgewood Read Saint Cloud MN 56303

Womens Health First Po Box 14000 Attn # 5588y Belfast ME 04915-4033

Womens Healthfirst Llc 2250 E. Devon Ave Suite 3523 Des Plains IL 60018